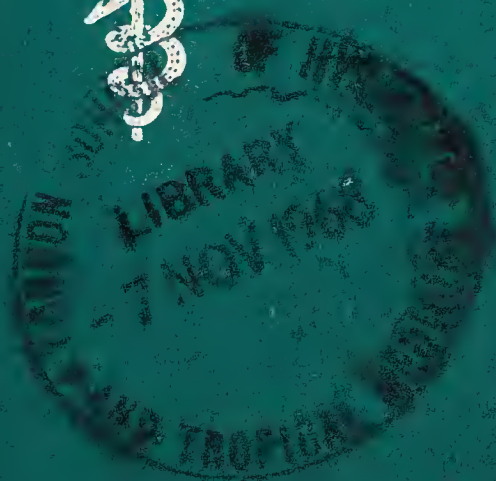



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The Health of Norwich



1967



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CITY AND COUNTY OF NORWICH

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH

AND THE



PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1967

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Health Committee

(As at 31st December, 1967)

Lord Mayor:

ALDERMAN C. H. SUTTON, J.P.

Chairman:

COUNCILLOR R. C. FROSTICK

Vice-Chairman:

ALDERMAN MRS. RUTH HARDY, J.P.

Members:

Coun. MISS V. E. DURRANT	Coun. E. PRITCHARD
„ C. A. C. HEWITT	„ L. G. RICHARDS
„ W. KNIGHT	„ G. ROADLEY-SIMKIN

Co-opted Members:

MR. P. JOHNSON, L.D.S., R.C.S.	{ <i>Representative of the Norwich Executive Council</i>
DR. T. D. F. MONEY	{ <i>Representatives of the Norwich Local Medical Committee</i>
DR. A. S. WOOLSTONE	

STAFF OF HEALTH DEPARTMENT

(As at 31st December, 1967)

Medical and Dental Staff:

Medical Officer of Health and Principal School Medical Officer

J. R. MURDOCK, (Mod) B.A., M.D., D.P.H., D.C.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer

D. G. H. PATEY, M.A., B.M., B.Ch., D.P.H.
(to 30th April 1967)

D. B. HILL, M.A., M.B., B.Chir., L.R.C.P., M.R.C.S., D.P.H.
(from 1st August 1967)

Assistant Medical Officer of Health with Special Responsibility for Maternity and Child Welfare

CICELY R. HAINES, M.B., Ch.B., D.Obst., R.C.O.G.

Assistant Medical Officer of Health with Special Responsibility for School Health

STEPHANIE A. LAING, M.R.C.S., L.R.C.P. (Lond) D.P.H., D.C.H.

Assistant Medical Officers of Health and School Medical Officers

MARGARET L. E. CHASTENEY, B.Sc., M.R.C.S. (Lond) L.R.C.P. (Lond),
D. Obst. R.C.O.G. (Lond)

R. M. BADMINTON, M.B. Ch.B (B'ham) D.P.H., D.Obst. R.C.O.G., D.A.

Principal School Dental Officer

A. E. SUMMERS, L.D.S. (Glasgow)

School Dental Officers

A. M. WILSON, L.D.S., R.C.S. (Edin.)

J. M. MITCHELL, L.D.S., R.C.S. (Edin.)

R. A. FELLA, B.D.S. (Glasgow)

MRS. M. E. CROOK, B.D.S. (St. Andrews)
(from 1st March, 1967)
(1 vacancy)

6 Dental Surgery Assistants (1 vacancy)

Chest Physician (*in conjunction with Regional Hospital Board*)

P. H. SUTTON, B.Sc. (Lond.), M.D., B.S. (Lond.), M.R.C.S. (Eng.),
M.R.C.P. (Lond.)

Nursing and Allied Staffs:

Health Education Organiser:

MISS J. EVA, S.R.N., S.C.M., H.V., Diploma in Social Studies (Dist.) (Lond.)

1 Assistant Health Education Organiser
(from 1st November 1967)

17 Combined Health Visitors and School Nurses
(5 whole time 2 part time vacancies)

2 Tuberculosis Health Visitors
(1 vacancy part time)

1 School Health Assistant

6 Health Visitors Assistants

Non-Medical Supervisor of Midwives
(1st January to 7th September, 1967)

Superintendent Nursing Officer
(from 8th September, 1967)

MISS B. D. BOXER, S.R.N., S.C.M., M.T.D., H.V., Queen's Nurse

1 Senior Nurse

14 Domiciliary Midwives

District Nursing Superintendent

MISS H. M. H. LONGHURST, S.R.N., S.C.M., H.V., Queen's Nurse

1 Senior Nurse

15 District Nurses (1 vacancy)

2 Bathing Attendants (equivalent)

Home Help Organiser:

MISS M. L. HOLDWAY

Assistant Home Help Organiser:

Home Helps – the equivalent of 100 whole-time
(11 vacancies)

Chiropody Service

Chief Chiropodist

E. C. COMBER, L.Ch., H.Ch.D.

Chiropodists (*Part-Time*) equivalent to 1.9 Whole Time

Foot Hygiene Attendants (*Part Time*)
equivalent to 2.7 Whole Time

2 Home Advisers

Speech Therapists:

1 Whole Time 1 Part Time

1 Part Time Physiotherapist
(from 6th February, 1967)

Public Analyst:

ERIC C. WOOD, Ph.D., A.R.C.S., F.R.I.C. (*Part Time*)

Mental Health Staff:

Mental Welfare Officers:

J. E. BRADSHAW, D.M.A. (Senior)

3 Whole Time

Adult Training Centre:

1 Supervisor, 1 Deputy Supervisor, 4 Assistants (2 male, 2 female)

Junior Training Centre:

1 Supervisor, 2 Assistant Supervisors (1 vacancy)

4 Nursery Class Attendants (*Part Time*)

Ambulance Staff:

2 Section Leaders, 28 Driver/Attendants

1 Motor Mechanic, 1 Apprentice Mechanic

Public Health Inspectorate:

Chief Public Health Inspector:

J. H. SMELLIE, M.R.S.H. F.A.P.H.I.

Deputy Chief Public Health Inspector:

C. D. DARLEY, M.R.S.H. M.A.P.H.I.

1 Senior Public Health Inspector (Food Hygiene)
(from 1st November 1967)

and

9 Inspectors (1 vacancy)

4 Trainee Public Health Inspectors (1 vacancy)

3 Authorised Meat Inspectors

1 Cleansing Inspector, 2 Cleansing Assistants

Administrative Staff:

Senior Administrative Assistant:

K. CAMPLING, D.M.A., A.R.S.H.

Administrative Assistant:

A. D. HOLDER, D.M.A.

28 Clerks

7 Shorthand-Typists

Weights and Measures Staff:

Chief Inspector of Weights and Measures

E. E. SCOTT, M.I.W.M.A.

Deputy Chief Inspector of Weights and Measures

G. H. PERKS, M.I.W.M.A.

1 Inspector, 2 Trainees, 1 Clerk, 1 Clerk/Typist

INTRODUCTION

I have pleasure in presenting the statutory Annual Report of the Medical Officer of Health for the year 1967 — the 76th Annual Report of the Medical Officer of Health for Norwich.

Population

The population, it is pleasant to record, has increased slightly from 118,100 to 118,610. This is not a tremendous increase but it is interesting to note that it is a reversal of a trend which has persisted for some years. It is even more satisfactory in that it is probably due to a revitalisation from a living point of view of central areas of the City.

Births

The number of live births has not materially altered at 1,822 compared with 1,809 the previous year. The actual number for 5 years ago — 1962 — was 1,874 and for 10 years ago, i.e. 1957, there were 1,776.

Infant Deaths

Last year I had occasion to comment that the number of infant deaths had risen to 43 and that although there was a considerable increase from the preceding year's figure of 28 the increase was not statistically significant. The figure for the current year was 32 (page 22) so that it would appear that the high rate figure for the last year was indeed due to chance.

The rate for the year was 17.56 per thousand live births. This compares with England and Wales figure for the year of 18.3 which was indeed the lowest figure recorded for this country as a whole. The infant mortality rate is always of interest as it is one of the health indices which one commonly uses. The figures quoted although very satisfactory do not allow for any grounds of complacency when one sees a figure of 14.4 for the Netherlands and 13.3 for Sweden for 1965 (the latest figures available).

Accidental Deaths

A total of 47 accidental deaths was recorded during the year. This compares with 44 for 1966, 51 for 1965, and 37 for 1964. The number of those who lost their lives on the road was 19 which compares with 22 last year, 17 in 1965 and 14 in 1964.

Tuberculosis

Deaths from tuberculosis amounted to only 2 during the year (page 22). This indeed is in sharp contrast with the figures of 200 plus, which were commonplace in the pre-Great War years.

Cancer

274 Norwich residents died from cancer during the year, (page 22). Included in this total was 81 deaths (being 74 male and 7 female)

from cancer of the lung and bronchus. This compares with 52 deaths, 44 male and 8 female, for the preceding year. However, the average number of deaths for the 10 years, 1957–1966, was 62, and the difference was not found to be statistically significant.¹ This, however, in no way, makes heavy cigarette smoking less suicidal. In this connection it must be stressed that this habit is not only associated with cancer of the lung but that those who indulge in it also have a greater tendency to develop chronic bronchitis and heart disease.

Marriage

In 1965 I commented on the low marriage rate in Norwich compared with England and Wales. This trend has still persisted as the rate is only 9.49 per thousand of the population whereas the England and Wales rate for 1967 is 15.9. Perhaps this is a good stage also to consider the illegitimacy figures. The percentage of illegitimate births for the year was 9.93 whilst the figure for 1966 was 9.40. This compares with a national figure of 8.4. I had occasion to comment on this previously.

Cremation

Last year I noted that there had apparently been a halt in the increasing percentage of persons cremated rather than interred. In 1967 the number of cremations carried out in the area totalled 998 compared with 888 in the preceding year. The trend, therefore, appears to be a continuing one. So far as the Norwich City Crematorium is concerned the numbers have increased from 409 to 477.

Climatology

During the year, as a whole, there was more sunshine than on average.

The table shows the rainfall for 1967 was low (2" below normal) and that January, February and March were exceptionally warm (page 20).

Employment

The figures supplied by the Ministry of Labour for the number of unemployed in the Norwich Employment Exchange Administrative Area are interesting (page 18) although, of course, the area embraces

¹ Mean of deaths 1957 – 1966 = 62.5

Deaths 1967 – mean value = 18.5

Standard Error = $\sqrt{\frac{(p \times q)}{n}}$

The increase in the number of deaths in 1967 over the mean value is less than 3 times the standard error and therefore not significant.

rather more than just the City of Norwich. I set out the figures for the last five years:-

	Mid January	Mid December
1963	3,381	1,846
1964	2,001	1,417
1965	1,531	1,224
1966	1,323	1,731
1967	1,904	1,899

Cervical Screening

Last year I commented on the role of the Local Health Authority in cervical screening and the more realistic concept of a "Well Woman" Clinic. I am still of the opinion that the basic role of the Local Health Authority in such an exercise is one of promoting health education, in this particular field, I hope in the much wider context of "Well Woman" Clinics rather than just a mere cervical smear, should indeed be a matter for the family doctor. This is not to say, however, that if patients do not or cannot be persuaded to attend their family doctors a Local Authority should not make alternative facilities available.

There have been some interesting developments in this whole concept, these have taken place in 1968, and I hope to review them at the end of the year.

Home Help Service

This Service is (page 53), I think, one of the basic services of a Local Health Authority. It is truly preventive in nature in that by its means folks can continue to live in their own homes whereas otherwise they would require hostel or, in more advanced cases, chronic sick, accommodation. I have repeated many times and I make no apologies for repeating again, that the proper place for elderly folk to live is in their own homes. Their houses, their contents and especially their treasured possessions, their neighbours and their environment generally in the vast majority of cases are interwoven into the fabric of their lives. Consequently, Local Authority Welfare Homes and similar, no matter how comfortable, and they are comfortable, nor how kindly administered, and they are kindly administered, can ever be a full substitute for old folk living in their own homes. However, as the years roll by they get more feeble and their feet frequently tend to give trouble. This is where the Home Help Service and the Chiropody Service play a most vital role. By keeping them mobile the processes of ageing are slowed up. If, in addition to health, they can have adequate meals this too I believe to be a most important feature. It is, therefore, with great satisfaction that I read that the Welfare Authority have now adopted the suggestion, albeit on a limited scale, which I made six years ago in my Annual Report, of making available dinners to old folk in hostels although they are not resident there.

One of the difficulties in administering the Home Help Service is the lack of personnel. It is very difficult indeed to get women to undertake this arduous task. They must be, and indeed they are, kindly disposed with a well developed social conscience. The mere pay is not sufficient nor should it be to attract them. It therefore behoves us to make the best possible use of these personnel and it was, therefore, rather worrying when we did a check last year to find our Home Helps, on an average, lighting 300 coal fires each morning. I fully realise that old folks like their coal fires, but we just have not the staff to cope with this problem on this scale and some measures will have to be evolved to deal with it. It is not clear what is the alternative. Gas fires can be a source of danger to old folk but electricity is rather expensive. However, the expense of installing and running could, if the will existed, be overcome. Some satisfactory solution to this problem will have to be found. Whilst on the use of manpower in the Home Help Service I think one should perhaps mention that I have for some time been perturbed that a considerable amount of time is spent in antiquated methods of house cleaning. The huge bulk of the houses into which the Home Help goes are those which are not in the first flush of youth, and amenities are not such as one would find in a modern post-war house. As often as not any hot water has to be boiled and there are no mechanical aids for cleaning. We have, therefore, just recently launched a Peripatetic Home Help Van. This is a small van equipped with a constant supply of hot water and carrying buckets, vacuum cleaner, polishes, etc. This is in an early stage of development and will be reviewed at the end of the year.

Housing

Although in my opinion there still remain a number of houses which would be best dealt with by being demolished the improvement of properties is assuming tremendous urgency, in particular larger more substantial properties. A recent survey on an area near the City has shown how urgent is this problem. Large family houses are being turned into houses of multiple occupation and the owners are drawing in vast sums weekly by way of rent, in some cases £20 to £30. If this development is likely to proceed in this way these houses will become slums in a very short period of time. Being large and family houses they are eminently worthy of improvement. I sometimes wonder, however, if our standards for houses in multiple occupation are not rather low. Bearing in mind that many of these houses are let off in single rooms, are two lavatories for every ten persons and two washbasins for a similar number realistic in this age?

General

At the moment of writing this Report the Government Green Paper on the National Health Service has been published. The Seebohm Report on the Social Services is extant and, of course, the Maud Report on Management of Local Government came to hand some months ago. The Report of The Royal Commission on Local Government is expected towards the end of this year. On the Parliamentary side the Ministry

of Social Security and the Ministry of Health are to be fused into one. With all these thoughts flying about some of them surely must come to roost, and not, as it were, in just a dusty pigeonhole in some government office. Steps have already been taken in Scotland to unify some of the social services and an extraordinary pot-pourri, or perhaps I should say Scotch broth, has emerged containing Home Helps, Mental Welfare Officers, Child Care Officers, Welfare of the Old Folk, Probation Officers, etc., with the chef de cuisine being a social worker! Health Visitors, however, were left on the preventative medicine side but obviously they have a role to play in the care of the aged as well as other major roles. What pattern will emerge for this country is, of course, beyond my ken, suffice it to say that the tripartite nature of the Health Service surely clamours for attention and the fact that the Ministry of Social Security and the Ministry of Health are to be amalgamated must portend something but what? This much I do know, that whatever changes are to be made I hope they will be made reasonably expeditiously as the Public Health Service is very short staffed. I have had occasion to comment on this on previous occasions. The service is not getting its share of the cream of medical manpower. In fact I wonder sometimes nowadays with the difficulty which we are experiencing in filling medical posts, whether, unless something drastic is done to provide a reasonably attractive career structure, we will get anything other than, as it were, skimmed milk!

Staffing

The staffing of the Health Department has given rise to great concern during the year. This pertains both to professional and administrative staff. Over the years the Department has grown both in the extent of the services which it provides and in degree to which it provides them. Indeed, I suppose few Local Government Departments can have the same rate of growth as that of progressive Health Departments. Over the years various services, as I have said, have been added on, and accepted, and the staffing position has become critical. Unfortunately, with the chill economic wind that was blowing last December our requests for additional staff were very sympathetically received and appreciated and recommended by the Employing Committee, but met with no success. Until the future pattern of preventative medicine or social medicine, call it as you will, in this country is clearly defined the recruitment to the Service, both professional and administrative, must be unsatisfactory. On a more specific note there have been several changes in the staff structure during the year. The Authority has come into line with modern thinking of the organisation of the Nursing Service of the Health Department and appointed a Superintendent Nursing Officer. This opportunity was provided by retirements.

On the Environmental side too progressive changes have taken place. Notably the appointment of a Senior Public Health Inspector with special interests in Food Hygiene. This will not only help the achievement of a high standard of food hygiene in the City but will also make for a greater degree of uniformity. Furthermore, it is a career step for

Public Health Inspectors and I sometimes think that they, certainly in the County Boroughs, need rather more career structure than at present pertains. Again referring to the Environmental Section of the Department, last year saw the first year of the full operation of the authorised Meat Inspectors, thus relieving Public Health Inspectors for other work which demands their special skills. We are continuously re-routinizing the whole Department to try and ensure that in this age of shortage of skilled personnel, the skills that people possess are used to the best advantage and that such personnel are not doing work which less highly trained individuals could undertake. This was reflected in the thinking that led to my recommending the introduction, some 9 years ago now, of Bathing Attendants to augment District Nurses, of trainee Public Health Inspectors, who in their latter years contribute to the work of the Department, and more recently the Meat Inspectors. We also, for some years now, have had Health Visitors Assistants who have proved extremely useful. I think the next body of officers which need looking at very critically in this respect is the Public Health Inspectorate to see if we cannot delegate some more of their multitudinous duties.

There were two senior staff changes during the year, the Deputy Medical Officer of Health became Principal Medical Officer with West Sussex County Council and the Cleansing Inspector retired after 40 odd years service. To one we extend best wishes for his future career, to the other a very long and happy retirement after a loyal and exemplary term of office.

Acknowledgement

I am grateful for the encouragement and support of the Chairman and Members of the Health Committee during the year. Without the loyalty and conscientious co-operation of the staff the Department could not continue to function. To all grades of staff I extend my thanks.



Medical Officer of Health.

HEALTH DEPARTMENT,
68 ST. GILES' STREET,
NORWICH, NOR 22E

8th August, 1968.

CITY AND COUNTY OF NORWICH

I.—GENERAL

VITAL STATISTICS
MORTALITY TABLES
SOCIAL CONDITIONS, CLIMATOLOGY,
WATER SUPPLY, CREMATION, ETC.

STATISTICS

Population	...	...	118,610
Area	...	...	8,165 acres
Inhabited Houses	...	...	43,618 (2.7 persons per dwelling)
Rateable Value	...	...	£5,788,167
Product of a penny rate	...	...	£23,322

VITAL STATISTICS

Live Births	...	...	1,822
Live Birth Rate (Crude)	...	...	15.4 per 1,000 population
Live Birth Rate (Adjusted)	...	...	16.17 per 1,000 population
Illegitimate Live Births per cent of total live births	...	...	9.93
Stillbirths	...	...	20
Stillbirth Rate	...	...	10.85 per 1,000 live and stillbirths
Total Live and Stillbirths	...	...	1,842
Infant Deaths	...	...	32
Infant Mortality Rate—			
Total	...	...	17.56 per 1,000 live births
Legitimate only	...	...	17.67 per 1,000 legitimate live births
Illegitimate only	...	...	16.57 per 1,000 illegitimate live births
Neo-natal Mortality Rate	...	...	12.62 per 1,000 live births
Early Neo-natal Mortality Rate	...	...	10.98 per 1,000 live births
Peri-natal Mortality Rate	...	...	21.72 per 1,000 live and stillbirths
Maternal Deaths (including abortion)	...	...	1
Deaths	...	...	1,375
Death Rate (Crude)	...	...	11.59 per 1,000 population
Death Rate (Adjusted)	...	...	10.89 per 1,000 population
Tuberculosis Death Rates—			
All Forms	...	...	0.017 per 1,000 population
Respiratory	...	...	0.017 per 1,000 population
Cancer Death Rates—			
All Forms	...	...	2.31 per 1,000 population
Lung and Bronchus	...	...	0.68 per 1,000 population
Other Sites	...	...	1.63 per 1,000 population
Infectious Diseases Death Rate	...	...	0.07 per 1,000 population
Marriage Rate	...	...	9.49 per 1,000 population

GENERAL

Births

There were 1,822 live births recorded in 1967, giving a crude birth rate of 15.4 per 1,000 population. This compares with a rate of 15.32 for 1966.

The ratio of local adjusted birth rate (16.17 per 1,000 population) to national rate is 0.94.

The England and Wales provisional rate is 17.2 per 1,000 population. The Registrar General notes that the falling birth rate has now reached its lowest level since 1960.

There were 20 still-births, a rate of 10.85 per 1,000 live and still-births. The rate for 1966 was 14.71.

LIVE BIRTHS				STILL BIRTHS		
Sex	Legitimate	Illegitimate	Total	Legitimate	Illegitimate	Total
Male	877	97	974	12	—	12
Female	764	84	848	8	—	8
Totals	1,641	181	1,822	20	—	20

Deaths

The net deaths amounted to 1,375, equivalent to a crude death rate of 11.59 per 1,000 population. This compares with a rate of 11.69 for 1966. The rate for England and Wales was 11.2, and was 0.5 lower than that for 1966.

The ratio of local adjusted birth rate (10.89 per 1,000 population) to national rate is 0.97.

Infantile Mortality

32 infants died before completing one year of life, representing a rate of 17.56 per 1,000 live births. The England and Wales rate for the year was 18.3 per 1,000 live births and was the lowest ever recorded in this country.

Of the 32 infant deaths, 23 occurred before reaching the age of one month making a neo-natal mortality rate of 12.62 per 1,000 live births. The England and Wales rate was 12.5

Maternal Mortality

One maternal death occurred during 1967; the cause of death being Chorionepithelioma. The mother died in a London hospital some 16 months after birth of her daughter.

Tuberculosis

2 persons died from respiratory tuberculosis giving a death rate of 0.017 per 1,000 population. Again there were no deaths from other forms of tuberculosis. The rate for 1966 was 0.076.

The provisional England and Wales rate for all forms of tuberculosis is 0.042 per 1,000.

Cancer

274 Norwich residents died from cancer during the year. This gives a death rate of 2.31 per 1,000 population. Included in this total was 81 deaths (74 male, 7 female) from cancer of the lung and bronchus. This compares with 52 deaths (44 male, 8 female) from this site in 1966, and represents a rate of 0.68 per 1,000 population.

The rates for England and Wales are 2.28 and 0.58 per 1,000 respectively.

Infectious Diseases

8 deaths were due to infectious diseases (7 Acute Primary Pneumonia and 1 Acute Influenzal Pneumonia), giving a rate of 0.07 per 1,000 population. 6 deaths occurred in 1966, representing a rate of 0.05.

Marriages

1,126 marriages took place in 1967. This represents a rate of 9.49 per 1,000 population, compared with 9.51 in 1966. The England and Wales rate is 15.9

Accidents

Deaths from accidental causes were:—

Motor vehicle accidents	19
All other accidents (see page 21) ...	28

There were also 154 persons seriously injured and 691 slightly injured in traffic accidents in the City. The 1966 figures were 174 and 759 respectively.

Of the persons involved in home accidents 383 attended hospital.

Included in this number are 49 people (14 adults, 35 children) injured as a result of scalds, and 28 people (6 adults, 22 children) injured as a result of burns.

Nursing Homes

There were 2 Nursing Homes registered in the City with a bed accommodation of 32, at the end of the year.

This provision is in addition to the 33 beds provided in the private wing of the Norfolk and Norwich Hospital.

Routine inspection is maintained.

Cremation

Of the deaths that occurred in Norwich a total of 998 cremations (47.4%) were carried out. 477 of this number were cremations at the Norwich City Crematorium.

NATURAL AND SOCIAL CONDITIONS

Geology

The chalk that underlies the greater part of Norfolk to a considerable depth, is in some places very near to the surface in and around Norwich. On top of the chalk, and filling in the undulations in its surface, lies a covering of glacial deposits—sands, gravel and boulder clays—left by the retreating ice sheets of about half a million years ago.

Climatology

Weather statistics have again been kindly supplied by Mr. Beale of Norfolk Agricultural Station—page 20.

Water Supply

Mr. S. N. Kelly, the Water Engineer and Manager, has given his comments on the City's water supply—page 76.

Sewerage

The City Engineer, Mr. R. K. Binks, has again given his comments on the arrangements for sewerage and sewage disposal—page 78.

Cleansing and Scavenging

A weekly collection of refuse is made from all domestic and business premises. One dustbin is emptied free of charge from business premises, a charge is made for anything additional to this.

Social Conditions

Mr. Simpson, the Manager of the Ministry of Labour's Norwich Employment Exchange, has kindly supplied statistics relating to the administrative area.

Mr. Simpson comments:—

“You will notice that there is very little difference between the figures for the two months (i.e. January and December 1967), but this does not, of course, mean that unemployment has remained

at about this figure throughout the year. The number of women unemployed does not vary greatly, and such changes as occur have little significance. Men's unemployment, however, has a distinct pattern every year, rising to a peak in January or February, and falling to its lowest in June or July. Last year the most favourable figure was 1,328 in July."

It must be noted that the figures quoted embrace an Administrative area which is larger than just the City of Norwich.

STATISTICAL TABLES

NUMBER OF UNEMPLOYED IN NORWICH EMPLOYMENT EXCHANGE ADMINISTRATIVE AREA, 1967

INDUSTRY GROUP IN WHICH LAST EMPLOYED	Mid January		Mid December	
	MEN	WOMEN	MEN	WOMEN
EXTRACTIVE				
Agriculture, Forestry & Fishing	110	1	104	2
Mining and Quarrying ...	6	1	1	—
	<u>116</u>	<u>2</u>	<u>105</u>	<u>2</u>
MANUFACTURING				
Food, Drink and Tobacco ...	74	21	72	10
Chemicals	4	5	4	—
Metal Manufacture	8	—	18	—
Engineering and Electrical Goods	41	10	55	9
Shipbuilding and Marine Engineer- ing	2	—	—	—
Vehicles	13	1	22	2
Other Metal Goods	12	3	16	4
Textiles	8	—	6	—
Leather and Fur	2	—	5	—
Clothing and Footwear ...	96	22	58	12
Bricks, Glass, Pottery, Cement	8	—	6	—
Timber and Furniture ...	22	1	29	—
Paper, Printing and Publishing	8	1	11	6
Other Manufacturing Industries	9	—	15	—
	<u>307</u>	<u>64</u>	<u>317</u>	<u>43</u>

SERVICES

Construction	445	1	413	2
Gas, Electricity and Water ...	18	1	26	—
Transport and Communications	187	5	124	4
Distribution Trades	207	39	228	29
Insurance, Banking, Finance ...	61	6	59	3
Professional and Scientific ...	45	9	39	15
Miscellaneous Services ...	173	41	191	38
Public Administration and Defence	79	5	111	8
Others (e.g. Ex-Service and those not latterly in employment) ...	70	23	103	39
	<u>1,285</u>	<u>130</u>	<u>1,294</u>	<u>138</u>
Totals ...	<u>1,708</u>	<u>196</u>	<u>1,716</u>	<u>183</u>
Totals 1966 ...	<u>1,166</u>	<u>157</u>	<u>1,526</u>	<u>205</u>

METEOROLOGICAL RECORDS, 1963-67

	Sunshine (hours)					Rainfall (inches)					Average Mean Temperature °F				Average Relative Humidity
	1963	1964	1965	1966	1967	1963	1964	1965	1966	1967	Years 1962–66 Min.	Max.	1967 Min.	Max.	1967
January	68.1	48.1	58.9	33.1	48.6	0.78	0.36	1.77	1.22	1.32	30.9	40.2	34.2	43.1	90.1
February	69.6	70.2	29.9	35.6	77.8	0.50	0.78	1.05	2.84	1.89	32.4	42.0	35.7	46.7	85.2
March	104.4	56.0	102.1	96.8	167.5	2.18	3.39	2.32	0.95	0.68	34.0	45.7	38.3	51.7	73.3
April	142.4	117.2	119.3	97.7	143.8	1.89	2.71	3.08	1.89	2.26	39.3	52.9	37.6	51.5	78.0
May	205.8	235.8	147.7	202.5	177.8	1.84	0.93	1.96	1.10	3.09	44.3	60.2	43.2	59.6	75.6
June	197.3	156.4	168.6	163.3	164.5	1.55	3.55	1.57	2.78	0.52	48.8	66.1	47.4	65.0	73.5
July	206.5	206.9	113.9	147.7	200.5	1.67	0.95	3.81	3.26	1.17	50.4	66.7	53.6	72.8	69.6
August	103.6	193.9	188.3	188.9	167.8	4.65	1.55	1.94	2.45	1.58	51.1	67.4	51.4	70.4	72.3
September	142.3	193.6	124.0	151.6	125.3	1.63	0.62	3.71	0.57	2.12	48.1	64.4	50.0	65.0	80.9
October	92.0	107.0	133.7	72.4	104.4	1.36	2.24	0.69	2.68	3.44	43.7	57.4	46.2	57.8	80.7
November	58.5	64.9	74.3	48.2	60.3	2.40	1.66	2.82	3.83	2.29	37.5	48.6	35.8	48.2	90.9
December	52.4	23.7	39.6	26.3	51.2	0.96	2.33	4.55	2.40	1.94	32.1	43.3	34.6	43.2	90.3
1443.0 1473.7 1300.3 1264.1 1489.5						21.41	21.07	29.27	25.97	22.30					

ACCIDENTAL DEATHS TO NORWICH RESIDENTS, 1967

	1-5 years		5-15 years		15-25 years		25-35 years		35-45 years		45-55 years		55-65 years		65-75 years		75 and over		Totals	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Accidents in the Home—																				
Burns ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Falls ...	—	—	—	—	1	—	—	—	—	—	1	—	—	—	1	2	6	9	9	11
Gas Leaks ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	1	1	2
Overdose of drugs	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1
Other Accidents*	2	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	3	—
Sub-Totals ...	2	—	—	—	1	—	1	1	1	1	1	—	—	—	2	3	6	11	13	15
Motor Vehicle Accidents	—	—	1	—	—	3	6	1	—	1	1	2	—	2	—	—	3	—	12	7
Totals ...	2	—	1	—	1	3	6	1	2	1	2	2	—	2	2	3	9	11	25	22

*Deaths from Other Accidents Male and Female shown above comprise:-

Asphyxia due to aspiration of regurgitated stomach contents	1	—	—	20 months
” ” ” ” ” ” ” ” ” ”	1	—	—	18 months
Flying accident (civilian aircraft)	1	—	—	35 years

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF NORWICH
DURING THE YEAR 1967

The following information has been supplied by the Registrar-General

CAUSE OF DEATH	Sex	Total All Ages	Under 4 wks.	4 wks. and under 1 year	Age in years									
					1—	5—	15—	25—	35—	45—	55—	65—	75 and over	
Tuberculosis, respiratory	M	1	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	1	—	—	—	—	—	—	—
Syphilitic Disease	M	1	—	—	—	—	—	—	—	—	—	—	1	—
	F	1	—	—	—	—	—	—	—	—	—	—	1	—
Other infective and parasitic diseases	M	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—	—
Malignant Neoplasm, stomach	M	19	—	—	—	—	—	—	—	1	1	6	9	2
	F	4	—	—	—	—	—	—	—	—	—	—	1	3
Malignant Neoplasm, lung, bronchus	M	74	—	—	—	—	—	—	—	2	5	18	35	14
	F	7	—	—	—	—	—	—	—	—	—	3	2	2
Malignant Neoplasm, breast	M	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	29	—	—	—	—	—	—	—	3	6	9	5	6
Malignant Neoplasm, uterus	F	10	—	—	—	—	—	—	1	—	3	2	3	1
Other malignant and lymphatic neoplasms	M	66	—	—	—	—	—	—	—	2	1	19	21	23
	F	65	—	—	2	—	1	—	—	—	7	12	21	21
Leukaemia, Aleukaemia	M	6	—	—	1	—	—	—	—	1	—	1	1	—
	F	4	—	—	—	—	—	—	—	—	—	—	1	1
Diabetes	M	2	—	—	—	—	—	—	—	—	—	—	2	—
	F	6	—	—	—	—	—	—	—	—	—	—	2	4
Vascular lesions of nervous system	M	71	—	—	—	—	—	—	—	2	2	7	26	34
	F	117	—	—	—	—	—	—	—	1	4	10	30	72
Coronary disease, angina	M	189	—	—	1	—	—	—	—	2	11	55	73	47
	F	123	—	—	—	—	—	—	—	1	—	12	37	73
Hypertension with heart disease	M	7	—	—	—	—	—	—	—	1	—	1	2	3

Other heart disease	...	M	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	1	8
Other circulatory disease	...	F	69	-	-	-	-	-	-	-	-	-	-	-	-	-	-	18	5	15	40
Influenza	...	F	99	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	2	3	78
Pneumonia	...	M	23	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	4	14
Bronchitis	...	F	26	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	3	20
Other diseases of respiratory system	...	M	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Ulcer of stomach and duodenum	...	F	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Gastritis, enteritis and diarrhoea	...	M	32	1	-	-	-	-	-	-	-	-	-	-	-	-	-	5	2	11	19
Nephritis and nephrosis	...	F	53	1	-	-	-	-	-	-	-	-	-	-	-	-	-	15	4	15	37
Hyperplasia of prostate	...	M	38	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	15	15
Congenital malformations	...	F	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	6	2	6
Other defined and ill-defined diseases	...	M	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	1	6	1
Motor vehicle accidents	...	F	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	4
All other accidents	...	M	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2
Suicide	...	F	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	3
Suicide	...	M	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Total all Causes		M	713	12	5	3	3	11	5	5	23	33	135	236	247						
		F	662	11	4	2	3	5	6	10	31	67	151	372							

RETURN OF DEATHS UNDER ONE YEAR DURING THE YEAR 1967

CAUSE OF DEATH	Under 1 week	1 and under 2 weeks	2 and under 3 weeks	3 and under 4 weeks	Total under 1 month	1 and under 3 months	3 and under 6 months	6 and under 9 months	9 and under 12 months	Total under One Year
Pneumonia ...	1	1	—	—	1	1	2	—	—	3
Acute Bronchiolitis ...	—	—	—	—	—	1	1	1	—	2
Congenital Malformations	1	—	—	—	1	1	—	—	—	2
Premature Birth ...	7	—	—	—	7	—	—	—	—	7
Birth Injury ...	1	—	—	—	1	—	—	—	—	1
Meningitis ...	1	—	—	—	1	—	—	—	1	2
Other Cases ...	1	—	—	—	1	—	—	—	—	1
Totals	12	1	—	—	12	2	2	1	1	17
	10	—	—	—	11	2	1	—	—	15

II.—NATIONAL HEALTH SERVICE ACTS

MATERNITY AND CHILD WELFARE

Birth Rate	} Please refer to page 14.
Stillbirth Rate	
Infant Mortality, Neo-natal and	
Peri-natal Mortality Rates ...	
Maternal Mortality Rate	

Care of Unmarried Mothers

Arrangements continued as in previous years, the Health Committee increased the grant, to the Norwich Diocesan Council for Social Work, from £200 to £400, and contributed to Mother and Baby Homes fees according to social and financial circumstances in individual cases.

Only one application for assistance was received and this was granted.

The following statistics relate to the work of the Diocesan Council for Social Work.

New maternity cases referred from Doctors, Medical Social Workers, Probation Officers and others, 101. Cases brought forward from 1966, 23.

1967	Age of mother									Married	Single
	15	16	17	18	19	20-24	25-29	30-34	35 & over		
Illegitimate babies:											
Retained by											
Mother	1	11	7	3	12	21	3	3	—	7	54
In care of Child-											
ren's Dept.	—	3	—	—	—	—	—	—	—	—	3
Adopted	—	2	1	4	3	9	—	1	—	4	16
	<u>1</u>	<u>16</u>	<u>8</u>	<u>7</u>	<u>15</u>	<u>30</u>	<u>3</u>	<u>4</u>	<u>—</u>	<u>11</u>	<u>73</u>
	—	—	—	—	—	—	—	—	—	—	—

Putative fathers whom it was possible to trace and interview	6
Putative fathers making voluntary financial contributions	4

The Clerk to the Justices tells me 26 Affiliation Orders were made during the year.

CARE OF MOTHERS AND YOUNG CHILDREN

(Section 22)

Parentcraft Teaching

A course of talks for expectant mothers, including preparation for motherhood and confinement, training in relaxation, and deep breathing exercises is carried out weekly in all the Ante-Natal Clinics where Midwives and Health Visitors combine to give the teaching and training and also to give instruction in baby care.

Confinements

Institutional confinement was recommended in 443 out of 714 cases in which sociological reports were made to the Hospital Authorities.

The trend towards hospital confinement continued, the percentage of Norwich mothers delivered at home showing a further reduction (40.5% compared with 43.9% in 1966).

Blood Testing

A weekly session is held at 4 Earlham Road. Testing includes a routine test early in pregnancy, a repeat test at about the 31st week of pregnancy and, if necessary, a further test at 35 weeks.

Sterilised Maternity Outfits

During the year a total of 856 sterilised Maternity Outfits were issued, this being 116 less than the number issued in 1966.

Infant Welfare Clinics

As the following figures show, there was an increase of nearly 1% in the number of children attending clinics, compared in 1966 when there was a decline of 16%, but the number of attendances again declined by some 4%.

It is interesting to note that some 85% of the babies born in 1967 attended clinic during the year.

Number of children who attended during the year and who were born in:			Total number of children who attended during the year	Total attendances during the year	Number of attendances during the year made by children who were born in:		
1967	1966	1965-2			1967	1966	1965-2
1,544	1,414	1,667	4,625	45,207	14,576	13,963	16,668
1966	1965	1964-1	The figures for 1966 were:		1966	1965	1964-1
1,333	1,481	1,562	4,376	47,199	14,752	15,172	17,275

Average attendance per child	1967	1966
	9.8	10.7
Average attendance per session (all clinics)	45.7	48.0

Welfare Foods

National Welfare Foods were distributed from 12 Infant Welfare Centres, and Churchman House. The following tables show the quantities issued during 1967 and 1966.

	Free	1967		Free	1966	
		Paid	Total		Paid	Total
National Dried Milk (Tins: equivalent to 7 pints liquid milk)	638	5801	6439	693	7803	8496

In addition, in 1967 2,985 tins were sold at the full cost of 4/- and 1966, 2842 tins.

	Free	1967		Free	1966	
		Paid	Total		Paid	Total
Orange Juice (Bottles)	1,256	23,033	24,289	1,233	23,146	24,379
Cod Liver Oil (Bottles)	278	919	1,197	270	1,012	1,282
Vitamin Tablets (Packets)	34	2,028	2,062	44	2,219	2,263

Dental Treatment

Treatment provided by the School Dental Service.

	Visits		Inspections			Additional courses of treatment commenced	Fillings	Teeth Filled	Teeth Extracted	General Anaesthetics	Emergencies	Patients X-rayed	Prophylaxis	Teeth root filled	Inlays	Crowns	Teeth otherwise conserved	Courses of treatment completed
	First	Subsequent	First	Requiring Treatment	Offered Treatment													
Children under 5	70 (64)	40 (26)	61 (53)	50 (47)	50 (47)	6 (6)	94 (52)	72 (45)	64 (81)	39 (48)	21 (28)	— (1)	11 (—)	— (—)	— (—)	— (—)	55 (37)	68 (61)
Expectant and Nursing Mothers ...	7 (11)	15 (14)	8 (5)	8 (5)	8 (5)	— (—)	7 (7)	7 (7)	9 (7)	2 (2)	— (1)	2 (—)	2 (6)	— (—)	— (—)	— (—)	— (—)	7 (12)

Dentures supplied:-

Patients supplied full upper or full lower	...	...	—	(2)
Patients supplied other dentures	...	...	1	(—)
Number of dentures supplied	...	...	1	(4)

(The figures for 1966 are given in brackets)

The Principal School Dental Officer reports:—

“Expectant and Nursing Mothers”

Further decline in treatment has been noted. The majority of these patients are having treatment with the General Dental Service.

Children Under Five

This only applies to children not attending school. There has been an increase in all forms of treatment except extractions which signifies that parents are becoming more aware of the necessity of conserving the temporary teeth.

Care of Premature Infants

Supplies of equipment for nursing premature babies at home are kept in readiness at the Maternity Clinic at 4, Earlham Road. Where the weight and vitality of such a baby justifies it, the domiciliary midwifery staff have the necessary facilities for looking after it at home and are encouraged to do so.

This equipment can also be used when required for transferring premature babies to hospital, and, in these cases, the midwife accompanies the baby in the ambulance.

Nursery Provision

No day nurseries, residential nurseries, registered daily guardians or creches at Infant Welfare Centres are provided by the authority.

The Nurseries and Child Minders Regulation Act, 1948

At the end of the year 4 persons were registered as Child Minders for a total of 71 children. 12 premises were registered as Day Nurseries for a total of 260 children compared with 140 at the end of 1966. All the premises are inspected periodically by a Medical Officer on the staff of the department.

Consultants' Clinics

Eye Clinic

Children found at the Infant Welfare Centre to have some defect of vision are referred to the School Eye Clinic at the Jenny Lind Hospital.

In cases where these children are found to require Orthoptic treatment they are referred to the Orthoptist at the Norfolk and Norwich Hospital.

Orthopaedic Clinic

Those children seen at the Infant Welfare Centres who appear to present any form of orthopaedic defect are referred, with the consent of the family doctor, to the Orthopaedic Clinic at the Jenny Lind Hospital.

Speech Clinic

Children under school age in need of speech training are referred by the Assistant Medical Officers to the part-time Speech Therapist at Churchman House.

PREMATURE BIRTHS		IN NORWICH		TO NORWICH RESIDENTS	
Total Births notified ...	...	Live	Stillborn	Live	Stillborn
Premature		3,242	52	1,792	21
(5lb. 8oz. or less)					
Domiciliary	...	33	1	33	1
Institutional	...	225	28	95	10
Totals	...	258	29	128	11

SURVIVAL BIRTH WEIGHT	STILL- BORN	LIVE BORN					
		DIED WITHIN				SURVIVED 28 DAYS	
		24 hours	2 days	3 days	7 days	28 days	% Survived % Total Live Premature
2lbs 3 ozs or less	1	2	—	—	—	—	1 33.3 0.7813
Over 2lbs 3ozs up to and including 3lbs 4oz.	2	3	—	—	—	—	4 57.14 3.125
Over 3lbs 4 ozs up to and including 4lbs 6ozs.	3	2	2	—	1	—	12 70.59 9.38
Over 4lbs 6ozs up to and including 4lbs 15ozs	—	2	—	—	—	—	26 92.86 20.31
Over 4lbs 15ozs up to and including 5lbs 8ozs	5	—	—	—	—	—	73 100 57.03
	11	9	2	—	1	116	90 63 90 63

MIDWIFERY SERVICE

(Section 23)

Midwives

The supervision of midwives continued as previously.

42 midwives, employed by Institutions, notified their intention to practise within the area, and 1 midwife who was engaged in private practice.

The staffing of the Domiciliary service steadily improved, and reached full strength by November. There were 709 home confinements whilst 110 district patients were admitted to hospital immediately prior to, or during, labour. In addition 788 maternity patients were discharged from hospital before the tenth day.

There are 12 ante-natal clinics and 9 mothercraft and relaxation sessions held each week. This care was undertaken by 12 full-time and 4 part-time midwives.

All midwives are trained in the administration of inhalational analgesia and have an Entenox apparatus.

Teaching of Pupil Midwives

Six midwives are approved as district teachers, and ten pupils completed their training and passed their examination during the year. Applications continue to be made from a wide area.

The West Norwich Hospital began as a Part I Training School and preliminary discussions were held regarding the provision of Part II facilities for pupils employed by the Regional Board.

Miscellaneous

2 mothers were attended only by the doctor, no midwife booked (emergencies), and one by neither doctor nor midwife.

(A) **Domiciliary Confinements** (see table) page 34

(B) **Institutional**

National Health Service—(a) Norfolk and Norwich Hospital

This hospital has a maternity block, which admits mostly abnormal or suspected abnormal cases. 1,538 mothers, of whom 483 normally reside in the City were confined during the year. There were 44 stillbirths and 31 babies died within 10 days of birth.

Ante-natal clinics continued to be held twice each week at the Norfolk and Norwich Hospital, at which city and county persons, booked for admission to the Maternity Wards at the local institutions attend. The Secretary of the hospital states that 2,271 women made 5,792 attendances at these clinics during the year, but he was unable to give separately the numbers in respect of city and county persons. In addition, 186 mothers made 186 post-natal attendances.

A. CONFINEMENTS ATTENDED BY DOMICILIARY MIDWIVES:—

	Total	DOCTOR BOOKED		DOCTOR NOT BOOKED		Mothers breast feeding at 10th day	ANALGESIA					
		Dr. present	Dr. not present	Dr. present	Dr. not present		GAS/AIR		GAS/OXYGEN		PETHIDINE	
							During delivery		During delivery		During delivery	
							Dr. present	Dr. not present	Dr. present	Dr. not present	Dr. present	Dr. not present
1967	709	348	359	2	—	173	12	18	301	318	264	242
1966	803	442	357	2	2	277	308	278	51	39	260	251
1965	980	527	441	—	2	425	474	373	—	—	348	326
1964	988	519	468	—	1	414	465	375	—	—	350	331
1963	991	591	398	—	2	452	530	365	—	—	423	292
1962	1,035	570	464	1	—	565	516	386	—	—	409	318
1961	1,026	570	453	—	3	527	516	367	—	—	436	291
1960	1,023	564	441	—	18	548	530	396	—	—	406	272
1959	972	469	435	3	65	596	443	420	—	—	333	301

HOME VISITS BY DOMICILIARY MIDWIVES:—

	Ante-Natal Care	NURSING VISITS DURING THE PUERPERIUM									
		To Mothers Delivered in Institutions and discharged before the 10th day from:—									
		To mothers delivered at home		Norfolk & Norwich Hospital		West Norwich Hospital		Drayton Hall		Outside Institutions	
		Patients	Visits	Patients	Visits	Patients	Visits	Patients	Visits	Patients	Visits
1967	9,017	342	1,964	281	926	165	384	—	—	—	—
1966	8,927	332	1,913	279	786	221	464	1	1	—	—
1965	9,091	346	1,972	231	763	166	523	—	—	—	—
1964	9,394	342	1,957	456	908	134	269	—	—	—	—
1963	10,317	256	1,638	142	369	147	335	—	—	—	—
1962	10,252	276	1,537	157	389	174	353	—	—	—	—
1961	9,672	211	1,137	161	368	170	285	—	—	—	—
1960	10,177	250	1,568	244	859	215	691	1	1	—	—

(b) West Norwich Hospital

1,034 mothers, of whom 355 normally reside in the city, were confined in this hospital. There were 4 stillbirths, 8 babies died within 10 days of birth.

(c) Drayton Hall (General Practitioners Maternity Home)

This Maternity Home is situated in the area of the County of Norfolk, and 261 mothers who normally reside in the city were admitted for their confinements.

(C) Consultant Facilities

The Regional Hospital Board provided a panel of three Specialists whose services are available in difficult maternity cases when required by the General Practitioners.

The Domiciliary Midwives may also call on the panel in the event of obstetric emergency without awaiting the arrival of a General Practitioner.

(D) Family Planning

The Council continued to make an annual grant of £50 to the Norwich Branch of the Family Planning Association which provides a central clinic at Kingsley Road and sub-clinic in the Department's clinic at Heartsease.

At the end of the year the Health Committee were considering the implementation of Ministry of Health Circular 15/67 in consultation with family doctors and the Family Planning Association.

(E) Maternity and Nursing Homes

Before applicants are registered the homes are inspected by a Medical Officer of the Health Department to ensure that the arrangements comply with the bye-laws. The department calls in the Chief Fire Officer to advise on arrangements for protection against fire. All the nursing and maternity homes are inspected periodically by a Medical Officer. At the end of the year, 2 persons were registered in respect of nursing homes (non-maternity), 1 home changed ownership during the year.

(F) Stillbirths

There were 20 stillbirths allocated by the Registrar-General to Norwich residents in 1967, giving a rate per 1,000 of the total live and stillbirths of 10.85 as compared with 14.71 in 1966.

These were sub-divided as under:

Legitimate 20, Being Males 12, Females 8.

Associated Conditions:

Maternal abnormalities—Ante-partum haemorrhage, 5; Toxaemia, 2; Total, 7.

Foetal abnormalities—Congenital abnormalities, 4; Total, 4.

Other conditions—Cord round neck, 1; Intra-partum anoxia, 1; Placental insufficiency, 2; True knot in cord, 1; Unknown, 4; Total, 9.

(G) Congenital Malformations

Arrangements continued from 1966 for the notification to the Registrar-General of congenital malformations observable at birth.

Our birth notification card has an 11-point questionnaire covering factors in family history, pregnancy and delivery which are known to potentially place a child “at risk” of handicapping conditions. The last question calls for particulars of any congenital malformation observable at birth and the table below shows the 50 conditions found in 39 babies (4 stillborn) born to Norwich mothers in 1967.

							Live	Stillbirth
Central Nervous System:								
Anencephalus	...	...	...	...	...	—	3	
Hydrocephalus	...	...	...	...	...	1	1	
Spina Bifida	...	...	...	...	...	1	—	
Other defects of Spinal Cord	...	...	...	...	...	5	—	
Defects of Eye:								
Blind	...	...	...	...	...	1	—	
Alimentary System:								
Cleft Lip	...	...	...	...	...	2	—	
Cleft Palate	...	...	...	...	...	1	—	
Heart and Great Vessels:								
Congenital Heart Disease	...	...	...	...	...	1	—	
Uro-Genital System:								
Renal Agenesis	...	...	...	...	...	1	—	
Hypospadias	...	...	...	...	...	1	—	
Limbs:								
Polydactyly	...	...	...	...	...	4	—	
Syndactyly	...	...	...	...	...	5	—	
Dislocation of Hip	...	...	...	...	...	2	—	
Talipes	...	...	...	...	...	12	1	
Deformity of Upper Limbs	...	...	...	...	...	1	—	
Other Skeletal:								
Aphasia on Skull	...	...	...	...	...	1	—	
Chondrodystrophy	...	...	...	...	...	1	—	
Other Systems:								
Cyst on Larynx	...	...	...	...	...	1	—	
Other Malformations:								
Multiple malformations	...	...	...	...	...	3	—	
Multiple malformations of Lower Limbs	...	...	...	...	...	1	—	
10 Babies with more than 1 abnormality:								
Defect of Spinal Cord, Talipes								
Defect of Spinal Cord, Dislocation of Hip								
Polydactyly, Syndactyly								
Spina Bifida, Other Defects of Spinal Cord								
Hydrocephalus, Talipes								
Polydactyly, Syndactyly								
Renal Agenesis, Multiple other malformations								
Congenital Heart Disease, other malformations								
Hydrocephalus, Chondrodystrophy								
Cleft Palate, Syndactyly, other malformations								

OBSERVATION REGISTER

We continued to keep on a register names of babies who were considered to be 'at risk' of a disabling, mental or physical disease.

A team of specially trained Health Visitors carry out hearing tests in the baby's home. In their second year of life, babies who were already on the Observation Register have been examined by the doctor at Infant Welfare Clinics, and, if thought to be fit and well in all respects, were removed from the Register. The Register is under constant review as new children move into Norwich and information is received from hospital specialists.

HEALTH VISITING

(Section 24)

The establishment remains as before at 17. However, a shortage continues.

The experiment in the attachment of Health Visitors to groups of General Practitioners continued from 1966, 2 Health Visitors being attached to five practices.

6 Health Visitors' Assistants were employed at the end of the year.

Cases visited by Health Visitors	Cases	Total Visits
Children born in: 1967 ...	1,640 (5)	4,061 (6)
1966 ...	1,268 (216)	2,655 (234)
1962-65	2,058 (28)	4,022 (141)
Persons aged 65 and over	152 (510)	275 (5444)
Mentally disordered persons	2 (6)	6 (144)
Persons discharged from hospital (excluding maternity and mental cases) ...	28 (5)	69 (27)
No. of tuberculous households visited ;;; ...	3 (—)	3 (—)
No. of households visited on account of other infectious diseases ...	169 (—)	205 (—)

The figure in parenthesis refer to additional cases visited by the assistants.

HOME NURSING

(Section 25)

The establishment is 1 Superintendent and 18 whole-time Home Nurses.

At the 31st December, 1967 1 Superintendent, 1 Senior Nurse, 14 whole-time Home Nurses were employed. The Superintendent and 10 of the Home Nurses were Queen's Nurses.

3 part-time Bathing Attendants were also engaged to give, under supervision, bathing and personal attention to patients.

An analysis of cases and visits show:

Home Nurses

			1967		Average No. of Cases and Visits 1959-1966	
			Cases	Visits	Cases	Visits
Medical	...	...	1,090	24,286	1,020	33,106
Surgical	...	...	389	9,632	255	8,555
Infectious Diseases	...	...	—	—	16	140
Tuberculosis	...	...	8	245	14	716
Maternal Complications			15	67	32	240
Others	...	...	5	473	83	840
			<u>1,507</u>	<u>34,703</u>	<u>1,420</u>	<u>43,597</u>

Included in the totals are 1,017 cases and 23,938 visits to patients aged 65 years and over.

Bathing Attendants

Bathing Attendants made 3,613 visits during the year chiefly to old people.

VACCINATION AND IMMUNISATION

(Section 26)

Vaccination against Smallpox

914 infants under 2 years of age were vaccinated during 1967.

Diphtheria Immunisation

During the year 1,760 children were immunised against Diphtheria and 2,140 children received booster doses. 921 of these children were immunised by General Practitioners, while the corresponding figure for the booster doses was 753. The following table shows the age groups of the children dealt with:

Year of birth	1967	1966	1965	1964	1960-1963	Others under age 16	Total
Number of children who completed a full course of primary immunisation ...	750	740	45	26	182	17	1,760
Number of children who received reinforcing doses ...	5	313	558	62	1,134	68	2,140

At the end of the year 6,603 children, or approximately 78.31% of the population under 5 years of age, had been protected.

The figure for 1966 was 76.09%.

Whooping Cough Inoculation

During the year 1,587 children, 1,563 of whom were under 5 years of age, were immunised. These, of course, were protected against Whooping Cough, Diphtheria and Tetanus by the one course of injections.

Vaccination against Poliomyelitis

The offer of protection against poliomyelitis to all persons under 40 years of age was continued. Oral vaccine was used exclusively by the department.

The following table shows the number of persons under age 16 years dealt with during 1967, both by family doctors and the department.

Primary course oral vaccine ...	...	1,671
Reinforcing dose oral vaccine ...	...	1,367

In addition 120 doses were made available to hospital staff and their families.

On the 31st December, 1967 the percentage uptake for persons under 16 years of age was 83.12.

Tetanus Immunisation

In addition to the general use of Combined Antigens for primary immunisation of infants, older children and adults are also protected against tetanus.

During the year 2,231 persons (1,803 under 16) completed primary immunisation and 2,650 booster doses were given (2,338 under 16).

1,342 of the primary immunisations and 1,250 booster doses were given by family doctors.

Yellow Fever Vaccination

The yellow fever vaccination service for travellers commenced on 1st July, 1960, continues. The fee for each vaccination is one guinea.

645 vaccinations were carried out during 1967.

AMBULANCE SERVICE

(Section 27)

The staff consisted of 2 Section Leaders, 28 Male Driver/Attendants, 1 Motor Mechanic and 1 Apprentice Motor Mechanic.

Vehicles: 6 Ambulances and 6 Dual Purpose Vehicles.

The cases dealt with during the year were as follows:

(i) Classification

	Stretcher Cases		Sitting Cases		Total	
	1967	1966	1967	1966	1967	1966
Accident and sudden illnesses	1,773	1,718	196	130	1,969	1,848
Maternity Cases	18	13	398	406	416	419
Mental Health Cases	163	173	91	68	254	241
Other Cases	10,360	8,813	27,411	25,696	37,771	34,509
Corpses (to Mortuaries)	—	47	—	—	—	47
	<u>12,314</u>	<u>10,764</u>	<u>28,096</u>	<u>26,300</u>	<u>40,410</u>	<u>37,064</u>

(ii) No of Cases Conveyed

	By City Ambulance Service	
	1967	1966
Ambulance ...	10,594	9,096
Sitting Cases Vehicles ...	25,336	24,089
	<u>35,930</u>	<u>33,185</u>

By Norfolk County Council at their option (these cases are the financial liability of the Norfolk County Council but our legal liability)

1967	1966
4,480	3,879

(iii) *No of Journeys Made*

	Journeys		Mileage	
	1967	1966	1967	1966
Ambulance	5,366	4,931	97,243	90,513
Sitting Case Vehicle	3,207	3,026	90,122	89,791
	<u>8,573</u>	<u>7,957</u>	<u>187,365</u>	<u>180,304</u>

Number of accidents and other emergency journeys included above:

	1967	1966
Ambulance ...	1,800	1,691
Sitting Case Vehicle ...	169	156
	<u>1,969</u>	<u>1,847</u>

	1967	1966	1965
Mileage per removal (including rail mileage)	3.8	4.0	4.0

In addition:—

- (a) 435 cases were conveyed by the Norfolk County Council for the City Ambulance Service in emergency. 496 cases were conveyed in 1966.
- (b) The mentally handicapped children were conveyed to and from the Junior Training Centre daily. 2,182 journeys were carried out in 1967; this compares with 1,879 in 1966. Several of the older girls were conveyed to and from the Adult Training Centre: 438 journeys being made this year compared with 481 in the previous year.
- (c) The Ambulance Service conveyed pupil midwives on 57 occasions from the Maternity Hostel, 4, Earlham Road to cases in the City.
- (d) Full use of rail transport is made. The tables below indicate the number of cases conveyed. For comparison, the number of long-distance road journeys is also given.
 - (i) Excluding journeys to the Neuro Surgical Unit, Addenbrookes Hospital, Cambridge.

	1967	1966	1956
Rail—No. cases ...	144	140	39
Distance (Miles) ...	15,599	15,751	4,992
Road—No. cases ...	27	33	102
Distance (Miles) ...	2,646	2,647	8,770

(ii) *Journeys to the Neuro Surgical Unit, Addenbrookes Hospital, Cambridge (Opened 1st October, 1961)*

		1967	1966
Rail -- No. cases	...	28	22
Distance (Miles)	...	1,848	1,364
Road -- No. cases	...	103	82
Distance (Miles)	...	6,798	5,084

The mileages are for single journeys only, and do not take into account the distances incurred by returning empty vehicles.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

(Section 28)

Chiropody Service

Treatment is provided for three priority classes laid down by the Minister — the elderly, physically handicapped and expectant mothers, but, as the following figures show, it is mainly the elderly who seek treatment. It may well be that expectant mothers who need treatment are already having private treatment before pregnancy. Of the 20 physically handicapped, 2 were indeed War Pensioners for whom treatment is given by arrangement with the Ministry of Pensions.

The service continued as at 31st December, 1966, to be fully staffed, 27 sessions per week being provided plus 2 sessions allocated to the treatment of the residents in the Council's Homes for the Aged and Infirm. (see page 44)

Tuberculosis

Reference is made to the care and after-care of Tuberculosis patients on pages 68 to 74.

Problem Families

There were 15 families on the list following the last meeting of the Health (Problem Families) Sub-Committee which was held on the 16th March, 1964.

SESSIONS		PATIENTS														TREATMENTS				Average Treatments per Session				
		ELDERLY PERSONS														Expectant Mothers	Phys. H'cpd	O.A.P.	Total					
		New		Expectant Mothers		Phys. H'cpd		60-64		65-69		70-74		75-79							80-84		85 and over	
Treated at	Total in year	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F					
36 Unthank Rd.,	683	215	4	7	8	—	91	48	178	56	181	44	142	38	90	22	54	215	748	7	89	6,109	6,205	9.08
Bull Close	97	21	—	—	—	—	12	9	39	2	46	5	32	6	7	1	—	23	136	—	—	748	748	7.71
Catton	93	17	—	2	1	—	13	8	24	11	34	11	23	1	3	—	1	33	99	—	20	727	747	8.03
Earlham	46	9	—	1	—	—	7	4	17	3	16	2	5	2	6	1	1	13	52	—	5	400	405	8.80
Heartsease	49	17	—	—	—	—	4	6	9	8	17	—	5	—	5	—	1	14	41	—	—	341	341	6.96
Lakenham	92	23	—	—	—	—	22	6	30	10	37	7	25	3	19	1	5	27	138	—	—	917	917	9.96
Nelson Street	93	15	—	—	—	—	11	4	30	5	26	7	19	4	15	2	2	22	103	—	—	742	742	7.99
Romany Road	49	7	—	—	—	—	6	1	8	1	11	3	8	—	3	1	8	6	44	—	—	367	367	7.48
Thorpe	49	14	—	—	1	—	3	8	13	7	22	8	22	6	4	—	3	29	68	—	4	381	385	7.85
Tuckswood	39	6	—	—	—	—	2	1	7	2	3	2	9	1	5	—	—	6	26	—	—	283	283	7.25
	1,290	344	4	10	10	—	171	95	355	105	393	89	290	61	157	28	75	388	1,455	7	118	11,015	11,140	8.63

Domiciliary Nursing

We continued to make appropriate arrangements with General Practitioners and the various social services for patients being discharged from hospital.

The Council has made arrangements with the British Red Cross Society and St. John Ambulance Brigade for the loan of sick-room equipment. The arrangements for payment to these voluntary organisations continued from the previous year.

During the year 762 articles were loaned to 511 patients under the scheme; this does not include the items already on loan at 31st December, 1966.

Incontinence pads and garments have been provided since May 1967, the majority of patients being those under the care of our Home Nursing Service.

Convalescent Treatment

The provision of convalescence for patients who have been under medical treatment at home continued from the previous year. Six recommendations were received from General Practitioners for patients to spend a fortnight at seaside Convalescent Homes as follows:

4 women of whom 1 died before the Convalescent Home re-opened after the winter; 1 young woman decided not to leave her children; 1 was admitted to Sheringham House, and 1 was admitted to Overstrand Hall while building alterations were in progress at Sheringham House.

2 men were considered to be outside the scope of the scheme and were not, therefor, accepted.

HEALTH EDUCATION

The appointment of an Assistant Health Education Officer towards the end of the year means that the efforts being made to meet the challenge presented by the many opportunities in the field of Health Education should become increasingly effective.

Parentcraft Courses

Weekly talks for expectant mothers given by Health Visitors and Midwives have been held in the Ante-natal clinics. Both Fathers and Mothers have been invited on a number of occasions to showings of the film "To Janet a Son". These sessions offer an opportunity for questions and discussion and are always well attended.

Health Education in the Infant Welfare Centres

Posters illustrating different aspects of health including Dental Health, Foot Health, Pram Safety, Home Safety, Clean food,

Vaccination and Immunisation have been on show on a monthly basis in all the clinics and at Churchman House. Colourful stands illustrating the danger of Poisons in the Home, Holiday Hazards and Fire Prevention have been displayed in the clinics. Films dealing with various aspects of Child Health and Welfare have also been shown and have proved very popular. Tufty Clubs run at six of the centres to give Road Safety Training to those under five, have continued with the help of voluntary workers.

School Programmes

Thanks to the goodwill of the Head Teachers of the schools concerned, posters on various health topics have been distributed to Secondary Modern and Junior Schools at intervals during the year. In the Spring Term posters and literature on "Safety in the Home" were sent to the Head Teachers of all schools in Norwich together with advance notice of the forthcoming Home Safety Exhibition. Boys and girls in Norwich schools were given an opportunity to take part in competitions held in connection with this.

Mothercraft Courses for senior girls, taken by Health Visitors in five Secondary Modern Schools and at Parkside School, continued throughout the year. These programmes are widely based and include teaching on Diet and Nutrition, Dental Health, Home Safety, Growing Up, etc.

The Head of the Domestic Science Department of the City College again asked for a Mothercraft course to be held there during the summer term; some 25 students attended this.

Films and film strips are used to illustrate the talks given in these courses, a good deal of practical work is done and when time tables permit, arrangements are made for girls taking the course to spend a session at an Infant Welfare Centre.

At the invitation of the Headmistress, talks on Personal Relationships illustrated with films have been given to all girls in their final year at a Grammar School and a Secondary Modern School.

Two sessions on "Your Health", which included a talk and a film on "Smoking and Health" followed by questions and discussion, were held at a Grammar School and attended by some 120 sixteen year old boys. Talks on drugs and Addiction were given to older boys and girls in two Secondary Modern Schools.

Requests have been received from a number of Junior Schools for talks on such subjects as Dental Health, the work of the Health Department, Personal Hygiene and Growing Up. The talks are usually illustrated by films, film strips and other visual aids.

A display stand drawing attention to dangers at the Seaside was on view in ten of the Junior Schools during the summer term.

Health Education and Young People

The subjects of Personal Relationships, Drug and Drug Addiction and Keeping Fit were covered with talks, films and discussions in some Youth Clubs.

Request Programmes

At the request of a number of organisations including Mothers' Clubs, Parent Teacher Groups, Women's and other organisations, talks on such subjects as the Work of the Health Department, Home Safety, Child Care, the Work of the Public Health Inspector and the Offices, Shops and Railway Premises Act were given.

Home Safety Campaign

A "Home Safe Home" Exhibition was held for four days in May as part of a Home Safety Campaign. Some 2,000 posters were circulated to Schools, Youth Clubs, Factories, Clinics, Doctors Surgeries, Chemists Shops, public buildings, Libraries and Shops. In addition some 15,000 leaflets were distributed on a rather wider basis which included Libraries, Chemists Shops, Ministers of Religion, Old Peoples Clubs, Womens' Voluntary Organisations, etc.

The Pharmaceutical Society in a "Safe Medicines" Campaign was associated with the Exhibition and made available their "Medicines with Care" display. The Exhibition also included displays by the Eastern Electricity Board, the Eastern Gas Board, Norwich Fire Service, the Oil Appliance Manufacturers Association and Proban Flame Resistant Fabrics. Three Secondary Modern Schools arranged display stands illustrating "Falls, Cuts and Gashes" and "Poisons swallowed by Norwich children in 1966". A small display at the entrance hall depicted "Safety in the Garden".

A cardinal feature of the Exhibition was a mock up of a 4-roomed house "Heartbreak House" prepared by the Department. This illustrated common hazards which can be found in the kitchen, bathroom, bedroom and livingroom. Members of the public were invited to spot the dangers in "Heartbreak House" and a number of prizes appropriate to Home Safety, such as flame-resistant paint, fire extinguishers, etc., were given by firms.

Invitations to the official opening by the Sheriff were sent to a large number of interested organisations and individuals and it was well attended.

Some 2,000 people visited the Exhibition during the four days on which it was open.

Another pleasing feature of the Exhibition was the way members of the Health Department staff rallied round in erecting

stands and at this the parties worked until late in the evening and volunteered staffing duties during and outside working hours. Our thanks were also due to members of the Home Safety Committee who put in a good deal of work.

In addition, as part of the campaign, painting and poster design and essay competitions on Home Safety topics were organised and it was most heartening to see such a volume of support from the Director of Education and the teaching staff of schools. Some 700 entries were received for the competitions. The prizes were provided by local firms and the Health Committee. We were also grateful to a number of teachers and retired teachers who having volunteered to judge the competitions, must have burned much midnight oil in so doing.

Arrangements were made for prizes awarded for the School Children's Competitions and for the Exhibition Competitions to be presented in the Council Chamber at the City Hall by Alderman Mrs. R. E. Hardy.

Forty-eight prizewinners, many of school age and accompanied by their parents, attended and enjoyed the tea provided in the Mancroft room. In all some 120 parents, prizewinners and others, were present.

MENTAL HEALTH SERVICES

Staff

The establishment of Mental Welfare Officers and staff at the Training Centres remains the same as last year.

Admissions to Hospitals

A. *Mental Illness*

(a) Compulsory admission by Mental Welfare Officers

				1967		1966
Hospital		Male	Female	Total		Total
Hellesdon	...	57	113	170		152
Thorpe St. Andrew's	...	3	8	11		19
Vale	...	1	4	5		4
		<u>61</u>	<u>125</u>	<u>186</u>		<u>175</u>

) Informal admissions
Mental Welfare Officers involved

			1967			1966
Hospital			Male	Female	Total	Total
Hellesdon	...	...	52	87	139	161
Thorpe St. Andrew's	...	...	6	1	7	6
Vale	...	...	11	15	26	61
Others	...	...	—	3	3	4
			<u>69</u>	<u>106</u>	<u>175</u>	<u>232</u>

Mental Welfare Officers not involved

			1967			1966
Hospital			Male	Female	Total	Total
Hellesdon	...	...	117	166	283	307
Grand Total			<u>247</u>	<u>397</u>	<u>644</u>	<u>714</u>

An analysis of the admissions show that of the total admissions 58% were male and 62% were female and 71% of all admissions were on an informal basis. These figures compared roughly with those for the preceding year.

In addition to these cases 101 other cases were referred to the Mental Welfare Officers but admission to a Mental Hospital was not necessary.

Day Care

An interesting development during the year was the inauguration by the Medical Superintendent of the Vale Hospital, Swainsthorpe, of day care facilities there. This has thrown quite a strain on the ambulance authority but provides for senile patients to spend days at the Hospital from whence they are returned in the evenings. The scheme has proved successful and a considerable improvement in the condition of the patients was noted.

B. Mental Subnormality

14 subnormal persons being 10 male and 4 female were admitted to Hospital for mental subnormals during the year. Curiously this is the same number as the previous year but of this 14 only 4 were children whose names were on the waiting list. The remainder were admitted under Court Order. As at 31st December, 1967, there were 26 males and 19 females on the waiting list. These are almost entirely severely subnormal children.

At the year end 247 Norwich patients were in Hospitals for the subnormal. These were distributed as follows:

	Male	Female	Total
Little Plumstead Hospital ...	131	81	212
Ida Darwin Hospital, Fulbourne ...	2	—	2
Nayland Hospital ...	—	8	8
Royal Eastern Counties, Colchester	9	3	12
Rampton Special Hospital, Retford	2	—	2
Risbridge Home, Haverhill ...	3	3	6
Riversfield Hospital, St. Neots ...	—	2	2
Hortham Hospital, Almondsbury ...	—	1	1
Farmfield Hospital, Horley ...	1	—	1
Cranage Hall Hospital, Crewe ...	1	—	1
	<hr/> 149	<hr/> 98	<hr/> 247

In addition at the end of the year there were 2 male and 3 female subnormals in Hellesdon (Psychiatric) Hospital.

C. National Health Service Act, 1946

The Authority continues to make arrangements and resume financial responsibility for providing temporary care in private mental homes for mentally subnormal children where the Regional Hospital Board is unable to provide such care in hospitals in the region. This arises due to illness or death of parents, or to allow parents a respite. The arrangements comprised:-

- 8 children admitted to Hales House, Winterton-on-Sea (a Home run by the National Society for Mentally Handicapped Children)
- 1 child admitted to Meadow Cottage, Overstrand (an Elizabeth Fitzroy Home)

Community Care

A. Mental Illness

The care and after care of mentally disordered patients has continued during the year. The Mental Welfare Officers made in the region of 2,700 visits which is about the same as for the previous year showing that the emphasis on domiciliary work evident in recent years has continued.

To provide an adequate community care service for patients suffering from mental illness there has to be a close liaison between the Mental Welfare Officers of the Local Health Authority and the Medical and Social Staff of the Local Mental Hospitals and in Norwich a harmonious working arrangement is achieved.

The Mental Welfare Officers are continuously in touch with the psychiatrists and the psychiatric social worker at Hellesdon Hospital

and attend regular case conferences held at the Hospital to discuss problems concerning patients either recently admitted to Hospital or due to be discharged home. During the year over a 100 cases were discussed at these conferences.

The essential part of a patient's rehabilitation on discharge from a Mental Hospital is quite often the finding of suitable employment. I have always considered this aspect of great importance and in fact I serve on the Local Disablement Advisory Council. The Mental Welfare Officers have continued throughout the year to hold monthly meetings with the Disablement Resettlement Officer where the problems of placing individual mentally disordered patients are discussed in detail. During 1967 a total of 28 persons were discussed at these meetings and as direct result 4 were found suitable jobs, one was sent on a Rehabilitation Course.

The Mental Health Staff have, during the year, attended several meetings to hear lectures and discussions on the various aspects of Mental Health and one of the Mental Welfare Officers attended the Annual Conference of the Federation of Associations of Mental Health Workers.

The Psychiatric Social Worker from Hellesdon Hospital continues to run a Social Club for female ex-psychiatric patients which meets one afternoon a week. The Health Committee, as before, places the Junior Training Centre at the disposal of a voluntary body which runs a Social Club one evening a week for patients suffering from neurosis. This body was originally known as 'Neurotics Nomine' but during the year the Club changed its name to the "Endeavour Club".

B. Mental Subnormality

Details of the cases reported to 31st December are as follows:

		Male	Female	Total
(1) Cases referred by Education Authority				
Under Section 11, Mental Health Act, 1959				
(i) Unsuitable for Education at School		—	—	—
(ii) Requiring support in the Community				
on leaving school	... ..	4	7	11
(2) Other sources				
(i) Discharged from Hospitals	... ..	5	3	8
(ii) From other areas	... ..	—	2	2

The foregoing cases were all placed under Community Care.

At the end of the year there were 383 mentally subnormal persons living in the community on the Register, details are:-

			Under 16	16-22	23-34	35-44	45-54	55-64	65 and over
Male ...	...	...	29	54	58	26	7	1	—
Female	...	...	18	60	72	31	15	7	5
			<u>47</u>	<u>114</u>	<u>130</u>	<u>57</u>	<u>22</u>	<u>8</u>	<u>5</u>

This figure, when added to that of those mentally subnormal patients in hospital, totals 635.

This represents 5.35 per 1,000 of the population of the County Borough of Norwich. The figure for 1966 was 5.13. The figure for England and Wales is 3.35.

The Junior Training Centre

Arrangements for the training of mentally subnormal children at the Junior Training Centre at 58, Earlham Road, continues. At the end of the year there were 47 names on the register, including 19 who were in the Special Care Unit, a unit for children who are so severely handicapped mentally and physically that they present special problems.

As in previous years, the children went on a day's outing to the seaside in the summer and they had the usual party at Christmas.

Adult Training Centre

The numbers attending the Adult Training Centre continue to increase and at the end of the year there were 101 trainees on the role, an increase of 4 over last year. In fact, during the year there were 20 new admissions; of the 16 that left, 6 went into outside employment, 3 into hospital and 1 left the district. The number of 101 comprised 59 males (24 City and 35 County) and 42 females (18 City and 24 County).

Throughout the year we continued to produce and sell woven-wood fencing, overlap fencing, seed trays and concrete products. Light Assembly work for local firms continued. A local firm which produces shoes and handbags towards the end of the year gave the Centre a considerable amount of work. Much of this new line is simple assembly work suitable for the women at the Centre because it requires no manual stress and much of it is suitable for the low-grade subnormals as a great amount of the work is unskilled.

The attendance record of the trainees continues to be impressive and this, is in my opinion, proof that they enjoy being at the Centre.

Once again during the summer months parties from the Centre went fruit picking at local farms and these excursions proved to be popular as a temporary diversion from the normal industrial work carried out at the Centre.

We again had a Stand at the Royal Norfolk Show. During Mental Health Week we also shared in providing an exhibition of Mental Health work in Norwich and this presented a further opportunity to advertise the products manufactured at the Centre.

This year a completely new and interesting venture was tried. The persons attending the Centre were taken on a week's holiday at a Holiday Camp on the coast. About 80% of those attending took advantage of this facility and the party spent the last week in May at the Camp being conveyed by coach from Norwich and being under the supervision of the Adult Training Centre Staff throughout. The Health Committee paid one third of the camp charges and provided coach transport. An Open Day was held at the Camp during the week when parents were invited to visit and spend the afternoon and evening there. The whole venture was extremely successful and popular and is to be repeated again in 1968 and may well become a permanent feature.

Social Club for Subnormals

The Social Club for subnormals continued to be held weekly throughout the year the meetings being held at the Junior Training Centre premises on Thursday evenings. Once again we had invaluable help in the running of the Club by voluntary helpers and the general activities such as pottery and painting continued; during the year cane-work has started. Each week, of course, in addition to handcraft there were recreational activities such as billiards, table tennis and other ball games.

Once again, at Committee expense, the Mental Welfare Officers took the members on an outing on the Broads. The usual Christmas Party was held when entertainment was provided by two Norwich Students who gave a recital of folk singing.

HOME HELP SERVICE

(Section 29)

The establishment of Home Helps (equivalent to 100 full-time) was not fully implemented as it was found to be impossible to recruit sufficient staff.

An Organiser and Assistant Organiser visit the householders and

allocate service as required, and so far as it is available.

				Per cent. of Total Cases		
	1967	1966	1950	1967	1966	1950
Maternity ...	63	60	196	5.5	5.1	40.3
Tuberculosis ...	4	5	9	0.4	0.4	1.9
Infirm--Aged & Chronic Sick ;;;	1,003	1,012)		88.6	87.1)	
Short-term Sickness	6	20)		0.5	1.8)	
Blind Persons ...	37	46)	281	3.3	4.0)	57.8
Families (where there was a danger of a temporary break-up)	15	15)		1.3	1.3)	
Mental illness ...	4	4)		0.4	0.3)	
	<u>1,132</u>	<u>1,162</u>	<u>486</u>			

The number of home helps employed on 31st December, 1967, was 1 full-time and 119 part-time, equivalent to 88.7 full-time staff.

HOSPITALS USED BY INHABITANTS OF THE AREA

(Under the East Anglian Regional Hospital Board)

- (a) *The Norfolk and Norwich Hospital* is a general hospital with a large out-patient department. The total of 410 beds includes 28 for eye cases. The daily bed occupancy was 349.62 compared with 354.19 in 1966. Admissions were 12,747 (12,040), discharges 12,270 (11,597) and deaths 465 (459).
- (b) *Jenny Lind Hospital for Children* works in close co-operation with (a) above and has 80 beds; boys under 11 years and girls under 12 years of age not suffering from infectious diseases are admitted. There is also an out-patient department. The daily number of beds occupied was 48.86 compared with 51.70 in 1966. Admissions 3,384 (3,233), discharges 3,337 (3,176) and deaths 46 (59).

- (c) *West Norwich Hospital*. This hospital has 329 beds, of which 160 are for acute cases and 112 for geriatric cases. The East Anglian Regional Department of Plastic Surgery is located there. Also allocated are 23 beds for diseases of the chest and 28 cubicles for infectious diseases. The average daily bed occupancy was 261.48 compared with 260 in 1966, admissions 7,106 (6,432), discharges 6,306 (5,777) and deaths 773 (655).
- (d) *Drayton Hall Maternity Home* provides 17 beds for General Practitioner cases. The average daily occupancy was 11.18 compared with 10.03 in 1966. Admissions 636 (552), discharges 633 (557) and deaths nil (0).
- (e) *Whitlingham Hospital, Trowse*. This hospital has 103 beds for the Chronic Sick. The average daily bed occupancy was 99.71 compared with 101.18 in 1966. Admissions 147 (102), discharges 27 (37) and deaths 122 (94).
- (f) *Hellesdon Hospital for Mental Cases* normally has 336 beds for males and 451 for females. The number of beds actually, occupied, however, was 678, 284 males and 394 females. The statutory accommodation at the Bethel Hospital is 112 beds and 107 were occupied, all by females.
- (g) *Accommodation for Mental Defectives*. See pages 48 to 53.

III.—WELFARE OF BLIND
PERSONS
AND CHILDREN ACT 1948

BLIND PERSONS

The welfare of blind persons is under the control of the Welfare Committee. The Chief Welfare Officer has again kindly supplied the following information:

40 persons were registered as blind, and 29 as partially sighted during the year. No treatment was recommended for 31 blind persons and 16 partially sighted persons, and the age groups are as follows:—

		Under 1 year	21-49	50-64	65 and over	Total
Registered Blind	...	1	—	3	27	31
Partially Sighted	...	—	1	1	14	16

The eye defects from which the registered blind and registered partially-sighted persons are suffering, and for whom no treatment is recommended, are listed on page 59.

The treatment recommended and follow-up action in respect of the remaining 9 blind persons and 13 partially-sighted persons is more particularly described below:

Registered Blind

Suffering from	Age	Treatment Recommended
Cataract and other	83	Surgical later
	77	Surgical. Waiting list for operation
	76	Surgical
	75	Surgical later
Glaucoma	78	Ophthalmic Medical Supervision
Others	72	Ophthalmic Medical Supervision
	72	Surgical (Waiting list for operation)
	69	Ophthalmic Medical Supervision
	48	Medical

Partially Sighted

Cataract	86	Ophthalmic Medical Supervision
	85	Surgical
	83	Surgical
	82	Surgical
	80	Surgical later
	72	Surgical
Cataract and other	90	Surgical
	71	Surgical (if condition permits)
Others	78	Ophthalmic Medical Supervision
	73	New glasses required
	63	Optical (new glasses)
	54	Ophthalmic Medical Supervision
	10	Ophthalmic Medical Supervision

Blind and partially-sighted persons registered during the year for whom no treatment is recommended by Section "F" of B.D.8.

	Registered Blind (Ages)	Partially Sighted (Ages)
Cataract	63, 83	85
Glaucoma	78, 79	69
Others	Under 1, 50, 53, 65, 69, 69, 72, 72, 73, 75, 76, 77, 79, 81, 81, 81, 82, 83, 83, 84, 84, 85, 85, 86, 86, 87, 88	91, 90, 86, 83, 83, 82, 81, 80, 80, 78, 77, 72, 63, 45

Follow-up of Registered Blind and Partially-Sighted Persons

Number of cases registered during the year in respect of which Section "F" of B.D.8 recommends:-

	Cataract	Cataract and Others	Glaucoma	Others	Blind	Partially Sighted
(a) <i>Treatment</i>						
Registered Blind	—	4	1	4	9	—
Registered Partially Sighted	6	2	—	5	—	13
(b) <i>No Treatment</i>						
Registered Blind	2	—	2	27	31	—
Registered Partially Sighted	1	—	1	14	—	16
	9	6	4	50	40	29

No cases of blindness following Ophthalmia Neonatorum during the year (see page 65)

CHILDREN ACT, 1948

On the instructions of the Children's Committee, a Medical Officer inspects each of the 5 Children's Homes at approximately six-monthly intervals. Arrangements are also made for the dental inspection and treatment by the staff of the School Dental Department of children residing in the Homes.

PREVALENCE, PREVENTION AND CONTROL

IV.—INFECTIOUS DISEASES

FEVERS, FOOD POISONING, ETC.

THE PREVALENCE AND CONTROL OF INFECTIOUS DISEASE

1,489 cases of infectious disease (excluding Tuberculosis) were notified during the year. The tables which follow show the details of these cases, deaths by age groups and hospital admissions.

TABLE 1
AGE GROUPS OF CASES OF INFECTIOUS DISEASES NOTIFIED

	Under 3 months	3-5 months	6-8 months	9 months to 1 year	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-34 years	35-44 years	45-64 years	65 and over	Age un-known	Total 1967	Total 1947	Total 1937
Diphtheria	7	127
Scarlet Fever	139	140
Whooping Cough	99	136 (a)
Measles	1125	337 (a)
Meningococcal infection	6	1
Acute Poliomyelitis	29	3
Acute Encephalitis	1	2
Puerperal Pyrexia	40	18
Ophthalmia Neonatorum	22	11
Erysipelas	2	23
Pneumonia (Acute Primary).	27	67
Pneumonia (Acute Influenzal)	8	51
Jaundice	9	25
Undulant fever	(a)	2
Paratyphoid fever	1	3
Typhoid fever	2	4
Food Poisoning	8	84 (a)
Dysentery	7	4
Malaria	3	2
Scabies	27	177 (a)
Verminous conditions	3	31 (a)

(a) not notifiable

TABLE 11

ANALYSIS BY AGE GROUPS OF DEATHS FROM NOTIFIABLE DISEASES

Disease	Under 1	1	2	3	4	5-9	10-14	15-19	20-34	35-44	45-64	65 and over	Total 1967	Total 1947	Total 1937
Diphtheria ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8
Whooping Cough ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
Acute Poliomyelitis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1
Meningococcal Meningitis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1
Acute Encephalitis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Puerperal Pyrexia ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Erysipelas ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Pneumonia (Acute Primary) ...	-	-	-	-	-	-	-	-	-	-	1	6	7	10	22
Pneumonia (Acute Influenzal) ...	-	-	-	-	-	-	-	-	-	-	-	1	1	2	15
Dysentery ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
Totals ...	-	-	-	-	-	-	-	-	-	-	1	7	8	20	51

Disease			Total Cases notified by Medical Practitioners	Cases admitted to Hospital	Cases admitted to Hospital during 1937
Diphtheria ...	...	...	—	—	126
Scarlet Fever ...	...	...	139	—	273
Whooping Cough ...	...	...	99	2	14
Measles ...	...	...	1125	7	10
Meningococcal infection ...	...	...	—	—	1
Acute Poliomyelitis ...	...	...	—	—	3
Acute Encephalitis ...	...	...	1	1	2
Puerperal Pyrexia ...	...	...	40	37	17
Ophthalmia Neonatorum ...	...	...	—	—	8
Erysipelas ...	...	...	2	—	12
Acute Primary Pneumonia ...	...	...	27	4	52
Acute Influenzal Pneumonia ...	...	...	—	—	9
Jaundice ...	...	...	9	—	—
Undulant fever ...	...	...	—	—	2
Paratyphoid Fever ...	...	...	—	—	3
Typhoid Fever ...	...	...	2	2	—
Food Poisoning ...	...	...	8	—	—
Dysentery ...	...	..	7	2	26
Malaria ...	...	...	—	—	2
Scabies ...	...	...	27	—	—
Verminous conditions ...	...	...	3	—	—

Scarlet Fever

139 cases, compared with 85 in 1966 were notified. No death occurred.

Diphtheria

Again no case was notified during the year.

Whooping Cough

99 notifications were received compared with 57 in 1966.

Measles

1,125 cases were notified during the year. 7 were admitted to hospital.

Poliomyelitis

Again no case was notified during the year.

Acute Encephalitis

1 case, following measles was notified.

Pneumonia

Acute primary pneumonia notifications were 27, 15 less than in 1966. No notification of acute influenzal pneumonia was received. There were 8 deaths from acute pneumonia, 1 following influenza.

Erysipelas

2 cases were notified as in 1966.

Puerperal Pyrexia

			Domiciliary Confinements	Institutional Confinements
Uterine infections	...	...	1	5
Urinary tract infections	...	...	—	5
Respiratory infections	...	...	—	1
Peritonitis	....	....	—	1
Congested Breasts	...	...	1	—
Salpingitis	...	...	1	—
Wound infection	...	...	—	1
Macrocytic anaemia	...	...	—	1
Unknown causes	...	...	—	23
			<u>3</u>	<u>37</u>

Ophthalmia Neonatorum

No case was notified.

Dysentery

7 cases were notified by General Practitioners and 2 were admitted to hospital.

Typhoid Fever

2 cases occurred during the year.

The primary case was an overseas student who became ill seven days after arriving in Norwich from Aden. He was admitted to hospital.

This patient lived in lodgings with four other overseas students, one of whom was found to be excreting salmonella typhi, and he was admitted to hospital also. The resident landlord was excluded from his work as a food handler and received financial compensation.

Food Poisoning

2 family outbreaks (4 cases) due to *S. typhimurium* were investigated.

4 sporadic cases also caused by *S. typhimurium* were notified or ascertained.

Infective Hepatitis

Under the Jaundice Regulations, 1943, Infective Hepatitis is notifiable in the counties of the Eastern Region.

The annual notifications for Norwich since the Regulation came into force have been as follows:

1944	...	206	1956	...	13
1945	...	36	1957	...	28
1946	...	30	1958	...	274
1947	...	25	1959	...	46
1948	...	131	1960	...	34
1949	...	184	1961	...	80
1950	...	101	1962	...	81
1951	...	34	1963	...	24
1952	...	19	1964	...	15
1953	...	20	1965	...	8
1954	...	34	1966	...	8
1955	...	24	1967	...	9

Scabies and Verminous Conditions

27 cases of Scabies were notified by General Practitioners compared with 17 in 1966.

Some of the patients were treated by the General Practitioners the remainder at the Health Department.

3 notifications of persons infested with vermin were received from General Practitioners (6 in 1966).

VENERELOGY

The Annual Report of Dr. D. W. Higson, the Consultant Venereologist to the Norfolk and Norwich Hospital Group, is printed as an Appendix pages 144 to 145.

LABORATORY WORK

Specimens from the Health Department were examined at the Public Health Laboratory as under:

Nose and Throat Swabs	...	...	...	10
Other Swabs	...	...	...	4
Swabs from Kitchens and Restaurants	...	...	...	1
Faeces and Urine	...	...	...	308
Bloods	...	...	...	30
Water	...	...	...	305
Milk	...	...	...	234
Ice Cream	...	...	...	141
Other Foods	...	...	...	26

CHEST CLINICS
MASS RADIOGRAPHY

V.—TUBERCULOSIS

CONTACT CLINICS
CARE AND AFTER-CARE

TUBERCULOSIS

Notifications and Mortality during 1967

Age-Periods	Notifications						Deaths					
	Respiratory			Non-Respiratory			Respiratory			Non-Respiratory		
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Under 1 year ...	—	—	—	—	—	—	—	—	—	—	—	—
1 — 4 years ...	—	—	—	—	—	—	—	—	—	—	—	—
5 — 14 „ ...	—	—	—	—	—	—	—	—	—	—	—	—
15 — 24 „ ...	2	2	4	—	—	—	—	—	—	—	—	—
25 — 34 „ ...	—	1	1	—	3	3	—	1	1	—	—	—
35 — 44 „ ...	2	1	3	—	—	—	—	—	—	—	—	—
45 — 54 „ ...	—	—	—	—	—	—	1	—	1	—	—	—
55 — 64 years ...	1	1	2	—	1	1	—	—	—	—	—	—
65 and over ...	3	—	3	—	1	1	—	—	—	—	—	—
Totals ...	8	5	13	—	5	5	1	1	2	—	—	—

Occupations of the cases notified were as follows:

Respiratory Tuberculosis

MALES				FEMALES			
Brewers labourer.	...	...	1	Boot and Shoe operative	...	...	1
Clerk, retired	...	...	1	Dressmaker	...	...	1
Footman, retired	...	...	1	Household duties	...	...	3
Hairdresser	...	...	1				
Newsagent, retired	...	...	1				
Steel, Cutter	...	...	1				
Taxi driver	...	...	1				
Waiter	...	...	1				
			8				5

Non-respiratory Tuberculosis

MALES		FEMALES	
		Drapery manageress	1
		Household duties	3
		School teacher	1
			5

The 5 new cases of Non-respiratory Tuberculosis were neck glands, aged 34, 81 and 62 years, meninges aged 28 years and kidney aged 29 years.

In addition to the 18 new notifications, 6 further cases (all Respiratory) came to my notice in 1967 in other ways than by formal notification. Thus, in all 24 cases of Tuberculosis, 19 Lung and 5 other forms came to my knowledge during the year. All the 6 were transfers to this city from other areas, age and sex distribution being as follows:—

RESPIRATORY					
			M.	F.	Total
Under 1 year	...	...	—	—	—
1- 4 years	...	...	—	—	—
5-14 years	...	...	—	—	—
15-24 years	...	...	—	—	—
25-34 years	...	...	—	—	—
35-44 years	...	...	4	—	4
45-54 years	...	...	—	1	1
55-64 years	...	...	—	—	—
65 and over	...	...	—	1	1
			—	—	—
			4	2	6
			—	—	—

Of the cases notified 44.44% were male and 55.55% females. 66.66% were married, 27.77% were single, and 5.55% widowed. A family history of Tuberculosis was ascertained in 22.22% of the cases.

The average age (years) at time of notification was as follows:

			1967	1957
Respiratory	...	M.	48.50	39.23
Respiratory	...	F.	34.40	26.64
Non-respiratory	...	M.	—	27.00
Non-respiratory	...	F.	46.80	23.50

Notifications in 1967 totalling 18 were 6 less than the figure for the previous year. Respiratory notifications decreased by 9 and non-respiratory cases increased by 3.

Deaths

2 deaths from Tuberculosis occurred during the year compared with 9 during 1966 and 5 in 1965. 1 occurred in hospital.

DEATHS AND DEATH-RATES FROM TUBERCULOSIS

Year	Population	Deaths			Death-rate per 100,000 of population		
		Respiratory Tuberculosis	Non-respiratory Tuberculosis	Tuberculosis (all forms)	Respiratory Tuberculosis	Non-respiratory Tuberculosis	Tuberculosis (all forms)
1893-99	Averages {	138	93	231	127	85	212
1900-09		144	87	231	123	74	197
1910-19		138	59	197	116	50	166
1920-29		115	25	140	93	20	113
1930-39		79	13	92	64	10	74
1940-49	{	61	9	70	56	8	64
1950		40	6	46	33	5	38
1951		31	9	40	26	7	33
1952		33	4	37	27	3	30
1953		13	1	14	11	1	12
1954		7	4	11	6	3	9
1955		14	2	16	11	2	13
1956		12	2	14	10	2	12
1957		5	1	6	4	1	5
1958		7	1	8	6	1	7
1959		7	2	9	6	2	8
1960		4	—	4	3	—	3
1961		8	3	11	6.68	2.51	9.19
1962		2	1	3	1.67	0.83	2.50
1963		7	1	8	5.86	0.84	6.70
1964		3	1	4	2.51	0.84	3.35
1965		5	—	5	4.20	—	4.20
1966		9	—	9	7.62	—	7.62
1967		2	—	2	1.68	—	1.68

Report of the Chest Physician

New Cases

13 new cases of Pulmonary Tuberculosis were discovered in 1967, a decrease of 9 from the previous year. There were 6 new cases of non-pulmonary Tuberculosis, an increase of 4 from the previous year.

Source of New Cases (Pulmonary and Non-pulmonary Tuberculosis)

	1965	1966	1967
Mobile Radiography Unit ...	2	4	1
General Practitioners ...	17	16	15
Contacts ...	1	0	1
Others ...	3	2	2
Transfers in ...	7	13	4

X-ray Only Service

3,120 persons (including 244 expectant mothers) from Norwich attended for a Chest X-ray only, and 159 or 5.1% were recalled for appointment. 5 new cases of Pulmonary Tuberculosis (a rate of 1.6 per thousand) and 40 cases of carcinoma of the lung (a rate of 12.8 per thousand) were discovered. The 244 expectant mothers who were X-rayed represent approximately 13.5% of the total number of Norwich mothers confined during the year, which is a decrease of 12.9% compared with 1966. This is a continuing result of a suggestion to General Practitioners that it is not necessary to arrange chest radiography of expectant mothers within five years of a previous normal film.

Deaths

There were 2 deaths from Respiratory Tuberculosis, a decrease of 7 from the previous year.

Contact Examination

229 new contacts were examined (186 at the Clinic and 43 X-ray only).

B.C.G. Vaccination

B.C.G. vaccination was again offered to all 13 year old school children, and older school children not already vaccinated. 79.7% (81.9% in 1966) parents of 13 year old children gave their consent.

The findings during the year were as follows:—

	Total No. of tests initiated	No.	Positive Cases % of completed Cases	No. vaccinated with B.C.G.
13-year-old children ...	806	41	5.3	720
Older school children ...	701	43	6.4	619

The strongly positive reactors were referred to the Consultant Chest Physician, no active Pulmonary Tuberculosis was found.

Tuberculin Testing of School Entrants

During the year Heaf Tests have continued to be carried out at the time of the first routine school medical inspection, of all entrants to Infants Schools whose parents have given written permission for this to be done.

The parents are informed by letter of the result, and particulars of those children who are positive reactors are given to the Chest Physician for following up.

The number of tests carried out during the year and the results obtained were as follows:—

No. of entrants examined	No. Heaf tested	No. whose parents declined the test	No. of negative reactors	No. of positive reactors	No. absent at time of reading
1,775	1,496	279	1,408	65	23

Of the 65 children who gave positive reactions, 49 were from families already known to the Chest Physician, having previously had B.C.G. vaccination, and no active tuberculosis was found in the remaining 16.

Cancer of the Lung

There were 81 deaths in Norwich from Lung Cancer, 74 male and 7 female, an increase of 29 over the previous year. This shows an increase of 30 males and a decrease of 1 female. During the year 75 new cases (67 male and 8 female) were registered by the Cancer Registration Department at the Norfolk and Norwich Hospital, and of this number 56 (48 male and 8 female) were discovered through the Chest Service.

Rehabilitation

The Local Authority was not called upon to accept financial responsibility for any tuberculosis patient during the year.

Rehousing of Tuberculosis Persons and Families

On list at 31st December, 1966	...	...	—
Additions 1967	...	...	4
Re-housed 1967	...	...	2
Removed from list 1967	...	...	—
On list at 31st December, 1967	...	...	2

Number of families on Tuberculosis Housing List at 31st December, 1962—6.

			Additions	Re-housed by Norwich Corporation	Removed from list for various reasons
1963	...	...	1	3	1
1964	...	...	1	1	—
1965	...	...	—	1	—
1966	...	...	—	—	2
1967	...	...	4	2	—

Number of families on Tuberculosis Housing List on 31st December, 1967—2.

ie Visitation

One Tuberculosis Visitor is employed to visit the tuberculous and bring to the notice of the Chest Physician the special needs of any notified person. She also attends with the Chest Physician at the Tuberculosis Clinic. This officer made visits as under during the year.

	TUBERCULOUS		NON-
	First Visits	Re-visits	TUBERCULOUS Visits
Families or Households ...	16	929	175
Patients ...	5	534	129
Home Contacts ...	35	1,249	391

In addition, 375 visits were made for other purposes.

The Health Visitors also made 3 visits to tuberculous households and the District Nurses attended 8 cases, making 245 visits.

Assistance

14,776 pints of milk were supplied free to 36 tuberculous persons.

During the year 1 patient was supplied with clothing.

MASS RADIOGRAPHY

During the year the Unit operated in Norwich at various large firms in the centre of the city, as well as at a local Council office and a depot, and at two public authorities. A total of 11,375 (6,843 Norwich residents, 4,437 Norfolk residents and 95 from other counties) were X-rayed. The results of the X-ray examinations are given below:—

	Males	Females	Total	1966 Total
No. of X-ray Examinations ...	7,926	3,449	11,375	8,565
No. of cases of Pulmonary Tuberculosis found:-				
(a) Active, requiring immediate treatment or close clinical supervision ...	3	2	5	4
(b) Cases requiring observation at the Chest Clinic ...	7	1	8	11

Rate per 1,000 of Active Cases of the total X-rayed = 0.44.

(The active cases were 3 males [County], age 28, 54 and 51 and 1 female [County], age 29, and 1 female [City] age 21.)

University of East Anglia

During October, the Unit visited the University, X-raying 888 students and staff—no cases of pulmonary tuberculosis requiring treatment or observation at the Chest Clinic were found.

H.M. Prison, Norwich

A total of 206 staff and inmates were X-rayed on 24th April—no cases of pulmonary tuberculosis requiring treatment at the Chest Clinic were found.

Hospital Staff

During the year, 764 Hospital Staff were X-rayed—no cases of pulmonary tuberculosis requiring treatment or observation at the Chest Clinic were found.

Hellesdon Hospital

The Unit paid routine visits to the hospital throughout the year, and 764 patients were X-rayed—no cases of pulmonary tuberculosis requiring treatment or observation at the Chest Clinic were found.

Weekly X-ray Sessions at Norwich Chest Clinic

At the weekly session for the X-ray of General Practitioners' referrals, etc., 1,537 (699 males and 838 females) Norwich residents were X-rayed—1 case of active pulmonary tuberculosis was found in a female (age 34), and 5 cases required observation at the Chest Clinic.

After October, 1967, these figures are included with the X-ray Only Service at the Chest Clinic and not recorded separately by the Mobile Radiography Unit.

WATER, DRAINAGE AND SEWERAGE,
HOUSING, SLUM CLEARANCE,
INSPECTION AND SUPERVISION OF FOOD

VI.—ENVIRONMENTAL
HEALTH CIRCUMSTANCES
OF THE AREA

COLLECTION AND DISPOSAL OF REFUSE

(a) **WATER Supply**

Mr. Kelly, the Engineer and Manager of the Water Department, has kindly supplied the following information:—

(a) The water supplied was satisfactory both in quality and quantity.

(b) No contamination of the water in the distribution system occurred during the year under review although on two occasions water from one of the distribution sampling points did not reach the highest standard of excellence but was classified as satisfactory. A washout valve has been fixed adjacent to the sampling point and no further trouble has been experienced.

(c) The number of dwellinghouses served in Norwich was approximately 44,090 representing a population of about 118,100 and about 40 people were supplied by standpipes.

(d) 46 samples of untreated water from the River Wensum were bacteriologically examined in the department's laboratory and all were unsatisfactory.

1,056 samples of water going into supply were examined in the department's laboratory and apart from the two samples referred to in paragraph (b) above all reached the highest standard of excellence.

A typical chemical analysis of the potable water is attached.

(e) The water has slight plumbo solvent action and this is corrected by the addition of saturated lime to the water going into supply.

Samples of water from a service pipe were examined every month for lead content. Results varying from 0.12 p.p.m. to 0.23 p.p.m. were obtained.

(f) The flouride content of the water was 0.12 p.p.m.

(b) **ANALYSIS of Sample of Water**

Bacteriological Analysis.

Coli Aerogenes Bacteria

Presumptive	...	...	...	0
Confirmed	...	...	...	0

Coliforms absent

Total Bacterial Count per ml.

Nutrient Agar 24 hrs. 37C.	35
----------------------------	----

Chemical Analysis

Free Co2	...	...	...	25 Parts per million
Total Alkalinity	CaCo3	...	240.0	
Chloride	Cl.	...	50.0	
Ammoniacal Nitrogen	N.	...	.09	
Albuminoid Nitrogen	N.	...	.12	

Nitrogen as Nitrite	N.	...	Nil
Nitrogen as Nitrate	N.	...	5.0
Total Hardness	CaCo3	...	375.0
Temporary	CaCo3	...	240.0
Permanent	CaCo3	...	135.0
Hardness by calculation			
Total	CaCo3	...	378.5
Due to Calcium	...	...	360.0
Due to Magnesium	...	...	18.5
Calcium	Ca.	...	144.0
Magnesium	Mg.	...	4.5
Carbonate	Co3	...	144.0
Sulphate	SO4	...	95.0
Nitrate	No3	...	22.14
Silica	SiO2	...	8.0
Iron and Alumina	Fe2O3 Al2O3	...	2.0
Iron	Fe	...	.05
Lead	...	...	} Absent
Copper	...	...
Zinc	...	...
Manganese	...	...
Total Solids at 180 C.	...	...	490.0
Suspended Solids	...	...	Nil

Physical

Water Temperature	...	...	6.5
Colour	...	...	5 Hazen
Opacity	...	...	Clear and Bright
pH	...	...	7.3
Taste	...	...	None
Odour	...	...	None
Calcium Carbonate	...	...	240.0
Calcium Sulphate	...	...	134.6
Calcium Chloride	...	...	23.3
Magnesium Chloride	...	...	17.6
Sodium Chloride	...	...	36.3
Sodium Nitrate	...	...	30.4

Bacteriologically the water is of excellent quality and no exception can be taken to the use of this water for domestic supply purposes on chemical grounds.

(c) Medical Examination of Employees

Newly appointed employees in the Water Department are medically examined. The Water Engineer also informs the Health Department of any sickness amongst the employees, and, if I consider it necessary, they are medically examined before resuming work. 18 newly appointed employees were examined and in 11 instances re-examination of employees absent through sickness were considered advisable and carried out.

(d) Wells

Details of premises in the City having private water supplies available by means of wells are as follows:—

Domestic premises—

Having mains water available	...	...	5
Without mains water	...	...	2
			— 7

Business premises (all of which also have mains water)

(a) Food manufacturing—

Dairy	...	...	...	...	1
Bakery	...	...	...	...	1
Breweries	...	...	...	...	4
Flour Mill	...	...	...	...	1
					— 7

(b) Other trades—

Water used for boiler feed	...	...	4
„ „ „ washing down	...	...	7
„ „ „ horticultural purposes	...	...	1
			— 12
			— 26
			—

Those premises engaged in food manufacturing use well water in connection with their business; the other firms use the water for a variety of purposes, as detailed above.

During the year 31 samples of well water were taken for bacteriological examination; of these eight were from the two dwellinghouses having no mains water available, and proved to be satisfactory. 2 unsatisfactory samples were obtained from a shop close to the river in the City centre, the water being used only for floor washing.

(e) Routine Sampling by Health Department

As far as the water going into the supply is concerned 310 samples were examined bacteriologically and with the exception of 4 samples all reached the highest standard of excellence.

(f) Drainage and Sewerage

Mr. R. K. Binks, the City Engineer, has kindly supplied the following:—

The annual programme of sewer reconstruction has been continued and approximately £40,000 has been spent on this work.

An engineering inquiry has been held by the Ministry of Housing and Local Government into the Council's application to

extend the Whitlingham sewage purification works.

Although the sludge digestion plant was in operation all the year, difficulty was experienced due to trade effluents being discharged into the sewers, which are toxic to the digestion process.

Work will commence in the near future on the Riverside Intercepting sewer scheme; this will relieve the River Wensum of pollution through the central area of the city."

Annual Report of

THE CHIEF PUBLIC HEALTH INSPECTOR

(J. H. SMELLIE, M.R.S.H., F.A.P.H.I.)

for the year 1967

My Lord Mayor, Ladies and Gentlemen,

I have pleasure in presenting my report on the work of the Environmental Health Section.

An innovation during the year was the appointment of a Senior Public Health Inspector fully employed on matters concerning hygiene in food premises, and who commenced duties in November. The Council decided to place the Public Abattoir under the control of the City and Markets Committee and as a consequence responsibility for its administration passed to the Clerk of the Markets on the 1st June, thus ending an era of 13 years operation by the Health Department of the Abattoir and its predecessor, the Slaughterhouse at Church Lane, Eaton. The Abattoir Superintendent returned to his former duties as a Public Health Inspector. The Authorised Meat Inspectors employed by this Department continued to carry out inspection of all the animals slaughtered at the Abattoir. A further change in policy concerned cesspool emptying; this related to the introduction, for the first time since the inception of this service in 1943, of a charge for emptying cesspools over and above one free emptying per quarter. I have referred later to the exhaustive Report of the Government's Working Party on "Refuse Storage and Collection" which was published during the year, and which emphasised clearly the need for local authorities to examine very closely their refuse collection methods with a view to achieving some improvement.

Under the Public Health Act, more and more work is flowing through the office, as evidenced by a substantial increase in the number of informal notices served on property owners, and in the numbers of nuisances or defects found and remedied. It is significant that the bulk of this work lies with the thousands of terrace houses of the late Victorian period and which are now 30—100 years old. Many of them have reached the stage where repair and modernisation is called for, whilst others can only be dealt with satisfactorily by means of Clearance Areas—it is their present condition which gives rise to the numerous complaints received.

There was however one field of public health inspection which occasioned less work than in previous years; this was in the supervision of “offensive trades”, one of which—an animal waste processing factory, which had been a source of nuisance from offensive smells—closed down at the end of July. Once again I have to report an increase in rodent control work; 1658 complaints were dealt with, compared with 1479 the previous year.

After a temporary fall in the volume of meat inspection in 1966, the figures for 1967 rose to a peak not hitherto reached—102,388 animals (equivalent to 50,252 cattle units). In fact, this work has trebled in the last 10 years and has thoroughly justified the appointment of the three specialised meat inspectors, whose concentration on this important service has freed the public health inspectors for the many other facets of their profession, in particular the inspection of food premises, shops and offices.

In the public cleansing field, I have made reference to the publication of the Government's Working Party on ‘Refuse Storage and Collection’. This Report has initiated a public awareness of the need for a comprehensive cleansing service, embracing not only the disposal of articles too large for the dustbin, abandoned vehicles, and other material hitherto outside the scope of normal collection services, but also a complete innovation in the form of ‘reception areas’ set up by local authorities and to which the public can bring items of domestic refuse.

Finally, my thanks are due to the Chairman and Members of the Health Committee for their continued guidance and encouragement.

I am, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

J. H. SMELLIE
Chief Public Health Inspector.

GENERAL

Public Health Acts — Remedying of housing defects.

The following is a summary of the principal work done during the year.

- 5,461 nuisances detected
- 1,164 informal notices served
- 262 statutory notices served
- 5,042 premises inspected
- 3,050 nuisances abated

Nuisance Orders were applied for in 41 cases. 8 were granted by the Magistrates, and the remainder were withdrawn as the necessary repairs had been done before the hearing.

Miscellaneous Complaints

884 visits were made in connection with sundry complaints such as offensive smells or accumulations.

Offensive Trades

Offensive trades carried on consist of 3 dealers in rags, skins and bones, one fellmonger and a firm carrying on the processes of (a) gut scraping, in one factory and (b) fat and tallow melting, fat extracting and bone boiling in another factory nearby. The trades mentioned under (b) continued to be a source of trouble owing to offensive smells. However, in February the Health Committee refused to renew their consent (under the Public Health Act) for these processes to be carried on, and this part of the firm's business ceased at the end of July, after their appeals to the Magistrates and to Quarter Sessions had been dismissed. Shortly afterwards they also ceased business in the gut scraping factory. 72 visits were made to premises carrying on offensive trades.

Common Lodging Houses

There are 2 registered keepers of common lodging houses. Both premises were found to be conducted in a satisfactory manner. 11 visits were made.

Drainage

2891 visits were made in connection with choked and/or defective drains, or alterations to, or reconstruction of drainage systems.

Caravan Sites

There is one licensed caravan site. 151 visits were made in respect of caravan sites and areas used for temporary siting of caravans.

Cinemas — Sanitary Conditions

Conditions were found to be satisfactory in the 6 cinemas in the city. 19 visits were made.

Infectious Diseases, etc.

During the year 288 visits were made to dwelling-houses and other premises in connection with contagious diseases, and food poisoning.

Infestation Control

(a) Rats and mice destruction

(i) *Treatment following complaints*

	Dwelling-houses	Business premises	Other premises	Total
No. of new complaints	1,390	199	69	1,658

(ii) *Treatment in the City Sewers*

Baits containing fluoracetamide 1/F (1081) were placed in selected sewer manholes throughout the City.

(iii) *Treatment of refuse tip*

A treatment was carried out at Harford refuse tip during the early part of the year and subsequent inspection revealed that the infestation had been successfully controlled.

2474 visits were made by the Inspectors in connection with rodent control.

(b) Pigeon Control

During the year 559 birds were destroyed, all of which were stupefied by a narcotic, viz. alpha chloralose. The birds were despatched in a chloroform lethalising chamber in co-operation with the R.S.P.C.A. 54 visits were made by the Inspectors. Since the inauguration, in 1962, of this service, which is intended to control and not entirely eradicate the pigeon population, over 4400 birds have been destroyed.

(c) Insects, etc.

373 visits were made in connection with other types of infestation, e.g. ants, cockroaches, etc.

Animal Health

6 pet shops and 2 boarding establishments for cats and dogs were licensed. 26 visits were made.

Rag Flock and Other Filling Materials Act, 1951

6 premises are registered for the purpose of upholstery, etc. 7 visits were made and 10 samples of filling material were taken, all of which were satisfactory.

Fertilisers and Feedingstuffs Act, 1926

18 samples of feedingstuffs and 4 of fertilisers were obtained for analysis by the Agricultural Analyst. Five of these were reported as unsatisfactory in some respect.

Public Swimming Baths

Routine weekly sampling of the water at the City of Norwich Bath and Lakenham Bath, for bacteriological examination, was carried out whilst the baths were open to the public. A total of 132 samples was taken; one (at Lakeham) was unsatisfactory.

School Swimming Baths

Routine weekly sampling of the water in the four pools was carried out whilst they were in operation. 142 samples were taken; 13 were unsatisfactory, affecting three of the four pools.

Noise Abatement

14 complaints of alleged nuisance from noise were dealt with informally; they are classified as follows:-

Factory processes—

Machinery	...	...	...	5
Moving of goods	...	...	...	1
Loading/unloading of vehicles			...	2
Building operations — use of Compressors			...	2
Motor cycle engines	...	...	...	1
Playing of musical instruments, radio sets etc.				2
Firing of rifles on rifle range	...		...	1

In all cases it was possible to effect some alleviation of the conditions. These complaints are among the most difficult to resolve because they have a habit of recurring at irregular intervals.

Technical training

Two Trainee Public Health Inspectors entered the fourth and final year of their course. One first year trainee left in March to take up a post outside Local Government. The other first year trainee proceeded with his studies satisfactorily.

OFFICE, SHOPS & FACTORIES

(a) Offices and Shops

A report has been submitted to the Minister of Labour on the Council's enforcement of the Offices, Shops and Railway Premises Act during 1967. The report included the prescribed particulars and an ex-

tract from these is given below—

(i) Registration and General Inspections

Class of premises	No. of premises registered during the year	Total number of registered premises at end of year	No. of registered premises receiving one or more general inspections during the year
Offices ...	22	510	22
Retail shops ...	78	777	70
Wholesale shops, warehouses ...	6	90	5
Catering establishments open to the public, canteens ...	21	66	19
Fuel storage depots	1	5	1
Totals ...	128	1,448	117

(ii) Number of visits of all kinds (including general inspections) to registered premises ... 1206

(iii) Analysis of persons employed in registered premises by workplace at end of year

Class of workplace	No. of persons employed
Offices ...	7,883
Retail shops ...	6,028
Wholesale departments, warehouses ...	1,183
Catering establishments open to the public ...	1,020
Canteens ...	151
Fuel storage depots ...	30
Total ...	16,295
Total Males ...	7,325
Total Females ...	8,970

(iv) Exemptions

1 exemption in relation to space (Section 5 (2)) was granted to an office, and was current at the end of the year

At the end of the year the number of premises remaining on the register was 1448, an increase of 81 on the previous year. 128 premises were newly registered, and 117 of these had received their general, i.e. initial inspection, indicating that once a registration form has been

received from an employer there is little or no delay in carrying out a full inspection. The defects found in the course of the inspection of premises are classified in the following table, together with those defects which were found to be remedied during the year:-

Section of the Act	Defect	No. found to exist	No. remedied
4	Cleanliness	23	21
5	Overcrowding	4	16
6	Temperature (including lack of thermometers)	100	175
7	Ventilation	14	23
8	Lighting	14	3
9	Sanitary conveniences	58	92
10	Washing facilities	28	89
11	Drinking water	9	9
12	Clothing accommodation	12	5
13	Sitting facilities	8	4
15	Eating facilities	1	2
16	Floors, passages and stairs not kept free of obstructions, etc.	56	40
17	Dangerous machinery	18	11
24	First Aid	79	108
50	Failure to display prescribed notices	111	223
	Structural or decorative defects to walls, ceilings, windows, etc.	50	34

One problem which has come to light concerns the provision of first-aid equipment and the displaying of prescribed notices, i.e. those on which is set out an abstract of the main provisions of the Act. In the former case it has often been found that materials used from the first aid kits have not been replenished to the required standards, and in the latter, the prescribed notices which were exhibited originally have been removed for redecoration of the walls and not replaced.

36 accidents involving men and 54 to women were reported, compared with 23 and 43 respectively in 1966. The following table gives details of the number of accidents occurring in each class of premises:-

	No. of Accidents	Percentage of number of persons employed
Offices	14	0.18%
Shops	51	0.84%
Warehouses and wholesale shops ...	11	0.93%
Catering Establishments	9	0.88%
Canteens	4	2.6%
Fuel Storage Depots	1	3.3%

None of the accidents was of a very serious nature. Sprains, strains, bruising and crushing accounted for a little more than half of the accidents reported, which are grouped as under:-

Sprains, strains	32
Bruising, crushing	20
Open wounds, surface injury	19
Fractures, dislocations	13
Burns, scalds	3
Multiple injuries, i.e. cases in which more than one part of the body was affected	2
Internal injuries	1

(b) **Factories**

Inspections for purposes of provisions as to health:

Premises	Number on Register	Number of Inspections	Written Notices
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authority	32	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	604	160	5
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers)	78	20	3
Total	714	181	8

Cases in which defects were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	by H.M. Inspector	

Sanitary conveniences:-
unsuitable or defective

8	4	—	3	—
---	---	---	---	---

Outwork

Nature of Work				No. of outworkers notified	
Wearing apparel— making etc.	299
Box making, etc.	5
Brushmaking	2
Cosaques, Christmas stockings, etc.	82
					<u>388</u>

HOUSING

Slum Clearance

198 families were rehoused from areas which had been confirmed by the Minister. 53 families were rehoused from individual unfit houses.

The following Areas were represented:-

	Dwelling-houses	Dwelling-houses/ shops	Licensed Premises	Population
Oak Street				
Clearance Area	9	2	—	12
Aylsham Road				
Clearance Area	5	1	—	17
Mill Close				
Clearance Areas	19	—	—	38
Eaton				
Clearance Areas	50	—	—	73
Sprowston Road/Black Horse Opening/Hooper Lane Clearance Areas	35	1	1	92
Sunny Hill				
Clearance Area	42	—	—	152
Goldwell Road/Gordon Road etc., Clearance Areas	201	6	—	496

A Public Inquiry into the Drayton Road/Ropemaker's Row etc. Clearance Area Compulsory Purchase Order, 1966, was held on 29th March, 1967. The Order was subsequently confirmed by the Minister.

Individual Unfit Houses

1.	Number of dwelling houses in respect of which demolition orders were made.	...	...	...	...	26
2.	Number of dwelling houses in respect of which closing orders were made.	...	...	...	...	55
3.	Number of dwelling houses in respect of which undertakings not to re-let were accepted.	...	...	...	...	5
4.	Number of separate dwellings or underground rooms in respect of which closing orders were made.	...	...	...	...	8

House Building

Permanent new houses and flats were erected during the year as follows:-

(a)	By the Council	...	...	...	...	932
(b)	Privately	...	...	...	...	282

Inspection of Dwelling Houses

1.	(a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	...	3,143
	(b)	Number of inspections for the purpose	...	7,252
2.	(a)	Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932.	...	1,573
	(b)	Number of inspections for the purpose.	...	2,210
3.		Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation — Housing Act, 1957.	...	424
4.		Number of dwelling houses, excluding those in paragraph 3 above, found not fit in all respects and dealt with under Public Health Acts.	...	1,164

Remedy of Defects without service of formal notice

Number of dwelling houses rendered fit in consequence of informal action by officers of the Local Authority.	...	1,004
--	-----	-------

Action under Statutory Powers

A.— *Proceedings under Sections 9 and 10 of the Housing Act, 1957:-*

1.	Number of dwelling houses in respect of which notices were served requiring repairs.	...	...	...	—
2.	Number of houses which were rendered fit after service of formal notice, by owners, or by local authority in default.				—

B.—	<i>Proceedings under the Public Health Acts:-</i>			
1.	Number of dwelling houses in respect of which notices were served requiring defects to be remedied.	...	...	235
2.	Number of dwelling houses in which defects were remedied after service of formal notices:-			
	(a) By owners	...	...	208
	(b) By Local Authority in default of owners		...	28
C.—	<i>Proceedings under Sections 16 and 17 of the Housing Act, 1957:-</i>			
1.	Number of dwelling houses in respect of which demolition orders were made.	...	...	26
2.	Number of dwelling houses in respect of which closing orders were made.	...	...	55
3.	Number of dwelling houses in respect of which undertakings not to re-let were accepted.	...	...	5
4.	Number of dwelling houses demolished in pursuance of demolition orders.	...	...	17
5.	Number of dwelling houses demolished in pursuance of closing orders.	...	...	14
6.	Number of dwelling houses demolished in pursuance of undertakings not to re-let.	...	...	37
7.	Number of demolition orders determined, the premises having been rendered fit for habitation.	...	...	—
8.	Number of closing orders determined, the premises having been rendered fit for habitation.	...	...	—
9.	Number of undertakings determined, the premises having been rendered fit for habitation.	...	...	—
D.—	<i>Proceedings under Section 18 of the Housing Act, 1957:-</i>			
1.	Number of separate tenements or underground rooms in respect of which closing orders were made.	...	...	8
2.	Number of separate tenements or underground rooms in respect of which closing orders were determined, the tenement or rooms having been rendered fit.	...	...	1
3.	Number of separate tenements on which closing orders were operative or undertakings have been accepted and which were demolished.	...	...	—
E.—	<i>Proceedings under Section 28 of the Housing Act, 1957:-</i>			
1.	Number of dwelling houses in respect of which demolition orders were made.	...	...	—
2.	Number of dwelling houses demolished in pursuance of demolition orders.	...	...	—
	Individual Unfit Houses represented during 1967:-		...	52

F.— Proceedings under Section 26 of the Housing Act, 1961:-

Number of dwelling houses in respect of which a closing order has been substituted for a demolition order. ...

Rent Act, 1957

Applications for certificates of disrepair.	...	...	2
Undertakings received from owners (after service of Form 'J').	...	...	—
Certificates of disrepair issued.	...	...	2
Applications for cancellation of certificates of disrepair.	...	...	1
Certificates of disrepair cancelled.	...	...	1

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

No. of milk distributors on register at 31st December ...105

No. of licences in force at 31st December:

(a) Dealer's (pre-packed milk) licence:			
(i) Untreated	...	...	8
(ii) Pasteurised	...	...	89
(iii) Sterilised	...	...	56
(iv) Ultra heat treated	...	...	6
(b) Dealer's Licence (Untreated)	...	...	1
(c) Dealer's (Pasteuriser's) Licence	...	...	1

Regular routine sampling of milk, both for chemical analysis and bacteriological examination, was carried out, and the samples submitted to the prescribed tests. Results of the samples taken are as under:-

	Satisfactory	Unsatisfactory	Total
Samples taken for chemical analysis (and tested in the office) ...	187	—	187
Samples taken for bacteriological examination—			
(a) Untreated milk ...	37	9	46
(b) Pasteurised milk ...	119	—	119
(c) Sterilised milk ...	23	—	23
(d) Ultra-heat treated milk ...	2	—	2

The Liquid Egg (Pasteurisation) Regulations, 1963

There are no egg pasteurisation plants in the City and no samples of liquid egg were taken for the purpose of the Alpha-Amylase test.

Poultry Inspection

No. of poultry processing premises	...	...	3
No. of visits thereto	...	...	100
Total number of birds processed	...	...	476,656
Percentage of birds rejected as unfit for human consumption	...	...	1.53%
Weight of poultry condemned	...	...	6,468 lbs
Turkeys, ducks, hens, broilers, capons and geese are dealt with.			

It is felt that the increased time being devoted by the Meat Inspectors to poultry inspection has benefitted the poultry processing trade to no small extent and is reflected in the fact that 1.53% of birds were rejected as unfit, compared with 0.28% the previous year.

Meat Inspection

Details of animals killed and inspected:

	Cattle excluding cows	Cows	Calves	Sheep and lambs	Pigs	Total	Equivalent Cattle Units
City of Norwich Abattoir	5,863	425	744	13,408	28,603	49,043	23,520
Pointer's Private Abattoir	161	27	159	23	52,975	53,345	26,732
	<u>6,024</u>	<u>452</u>	<u>903</u>	<u>13,431</u>	<u>81,578</u>	<u>102,388</u>	<u>50,252</u>

Condemnation of meat

<i>All diseases except Tuberculosis and Cysticerci</i>	Cattle	Cows	Calves	Sheep and lambs	Pigs
Whole carcasses condemned ...	3	1	7	39	228
Carcases of which some part or organ was condemned ...	1,603	276	15	1,291	11,282
Percentage of the number inspected affected with disease other than Tuberculosis and Cysti- cerci ...	26.6	61.3	2.4	9.9	14.1
<i>Tuberculosis only</i>					
Whole carcasses condemned	—	—	—	—	3
Carcases of which some part or organ was con- demned ...	1	—	—	—	1,422
Percentage of the number inspected affected with Tuberculosis ...	0.2	—	—	—	1.7
<i>Cysticercosis</i>					
Carcases of which some part or organ was con- demned ...	64	—	—	—	—
Carcases submitted to treatment by refrigera- tion ...	46	—	—	—	—
Generalised and totally condemned ...	—	—	—	—	—

Percentage of carcasses diseased:-

(a) *Diseases excluding tuberculosis and cysticerci*

	Cattle excluding Cows %	Cows %	Calves %	Sheep and Lambs %	Pigs %
1957	22.9	29.1	1.9	1.1	8.4
1965	13.4	28.8	8.4	1.0	12.3
1966	21.4	61.5	5.9	2.9	11.3
1967	26.6	61.3	2.4	9.9	14.1

(b) *Tuberculosis only*

	Cattle excluding Cows %	Cows %	Calves %	Sheep and Lambs %	Pigs %
1957	5.8	10.9	0.0	0.0	3.3
1965	0.4	0.3	0.0	0.0	2.0
1966	0.2	0.3	0.0	0.0	2.2
1967	0.2	0.0	0.0	0.0	1.7

Carcases and Organs condemned

	Cattle			Calves			Sheep			Pigs		
	A	B	C	A	B	C	A	B	C	A	B	C
Abscesses	1	808	659	—	4	—	1	165	10	12	255	1108
Actinobacillosis	—	64	—	—	—	—	—	—	—	—	—	—
Actinomycosis	—	84	—	—	—	—	—	—	—	1	—	—
Angiomatosis	—	—	25	—	—	—	1	17	5	—	912	62
Arthritis	—	3	—	—	—	—	—	1	—	4	29	61
Bruising	—	4	—	—	—	—	—	—	—	—	65	—
Cirrhosis	—	3	—	—	—	—	—	—	—	—	10	—
Congestion	—	3	—	—	—	—	—	—	—	—	—	—
Contamination	—	3	—	—	—	—	—	—	—	—	—	—
Cysticercus bovis	—	66	2	—	—	—	—	—	—	—	—	—
Cysticercus ovis	—	—	—	—	—	—	—	21	—	—	—	—
Distomatosis	—	887	—	—	—	—	—	236	—	—	3	—
Emaciation	2	—	—	1	—	—	13	—	—	23	—	—
Emphysema	—	5	—	—	—	—	—	—	—	—	—	—
Endocarditis	—	—	—	—	—	—	—	—	—	—	2	—
Enteritis	—	—	—	—	—	—	1	—	—	—	3	—
Epicarditis	—	—	—	—	—	—	—	—	—	1	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	4	—	—
Fatty degeneration	—	1	—	—	—	—	—	—	—	22	—	—
Fever	—	—	—	—	—	—	—	—	—	—	—	—
Haemorrhage	—	3	—	—	—	—	—	—	—	—	8	—
Hepatitis	—	2	—	—	—	—	—	—	—	—	2	—
Immaturity	—	—	—	2	—	—	—	—	—	—	—	—
Infarcts	—	5	—	—	—	—	—	—	—	—	—	—
Inflammation	—	27	30	—	—	—	—	—	—	—	239	—
Jaundice	—	—	—	—	—	—	4	—	—	6	—	—
Joint-ill	—	—	—	3	—	—	—	—	—	—	—	—
Mastitis	—	1	—	—	—	—	—	—	—	—	—	—
Melanosis	—	12	—	—	—	—	—	—	—	—	—	—
Moribund	—	—	—	—	—	—	—	—	—	—	—	—
Nephritis	—	184	—	—	2	—	—	1	—	2	115	121

Condemnation of Unsound Food

The following quantities of foods were condemned as being unfit for human consumption:-

Meat	Fish	Other Foods		
		Cartons	Tins	Packets
13 cwt. 3 qrs. 22½ lbs.	7 cwt. 1 qr. 18 lbs.	2,115	7,967	1,746

Chemical Examination of Food and Drugs

				Number of samples examined		Number reported as being unsatisfactory in some respect	
				Formal	Informal	Formal	Informal
Alcoholic drinks and liqueurs	...	...	...	—	3	—	—
Baby foods	...	...	...	—	1	—	—
Beverages	...	...	...	—	4	—	1
Bread and bread mixes	...	...	...	—	1	—	1
Butter, margarine and cooking fats	...	...	...	—	5	—	—
Cakes, pastries and biscuits	...	...	...	—	10	—	1
Cakes, pastries and biscuits—cream filled	...	...	...	—	4	—	—
Cake and pudding mixes	...	...	...	—	1	—	—
Cereals	...	...	...	—	3	—	—
Cheese and cheese products	...	...	...	—	6	—	1
Colouring, flavouring and decorative materials	...	...	...	—	13	—	3
Cordials, fruit juices and other soft drinks	...	...	...	—	10	—	—
Cream and artificial cream	...	...	...	—	3	—	—
Fish — smoked	...	...	...	—	1	—	—
Fish — tinned	...	...	...	—	10	—	5
Fish — fresh	...	...	...	—	1	—	—
Fish cakes	...	...	...	—	2	—	—
Fish spread	...	...	...	—	3	—	1
Flour	...	...	...	—	1	—	—
Fruit — dried	...	...	...	—	1	—	—
Fruit — fresh	...	...	...	—	7	—	—
Fruit — tinned	...	...	...	—	21	—	5
Fruit puddings and pie filling mixtures	...	...	...	—	7	—	—
Ice Cream	...	...	...	—	5	—	—
Ice Lolly	...	...	...	—	6	—	—
Jam, marmalade and conserves	...	...	...	—	6	—	—
Jellies	...	...	...	—	2	—	—
Meat — raw	...	...	...	—	4	—	—
Meat - prepared	...	...	...	3	22	2	4
Meat products	...	...	...	—	35	—	4
Medicines and drugs	...	...	...	—	22	—	3
Milk	...	...	...	—	1	—	—
Milk — tinned	...	...	...	—	1	—	—
Sauces, pickles and condiments	...	...	...	—	6	—	1

				Number of samples examined		Number reported as being unsatisfactory in some respect	
				Formal	Informal	Formal	Informal
Sausages	...	...	...	1	16	—	—
Soup	...	...	...	—	3	—	—
Sweets and chocolate	...	...	...	5	40	—	3
Vegetables — fresh	...	...	...	—	2	—	—
Vegetables — tinned	...	...	...	—	4	—	—
Vinegar	...	...	...	1	1	—	—
Yoghurt	...	...	...	—	3	—	2
Unclassified	...	...	...	—	3	—	—
				<u>10</u>	<u>300</u>	<u>2</u>	<u>35</u>

The above-mentioned figures include 12 samples of food taken to establish the presence, or otherwise, of pesticide residues; details are as follows:-

Cereals	...	...	1
Fruit—fresh	...	...	7
Vegetables — fresh	...	...	1
Lard	...	...	1*
Milk	...	...	1*
Ready-cooked meal	...	...	1*

They were all reported as being free from pesticide residues.

*Taken as part of a national survey into this problem in which the Council is co-operating.

Merchandise Marks Act

11 samples of assorted foods were purchased and examined in the office to ensure compliance with the Merchandise Marks Acts; all were satisfactory. In addition 355 visits were paid to premises, e.g. market stalls, to observe any possible contraventions of the Acts.

Food Premises			Number fitted to comply with Regulation 16	Number to which Regulation 19 applies	Number fitted to comply with Regulation 19	Inspections
Category		Total Number				
Bakehouses	...	20	19	20	20	196
Butchers...	...	117	99	117	111	450
Catering Establishments		286	255	286	278	757
Factories	...	23	23	23	23	91
Fried Fish Shops		56	50	56	54	119
Public Houses	...	255	251	255	255	186
Grocers, confec- tionery and general	...	483	431	483	469	2443
Wholesale grocers, wholesale markets and cold stores		18	18	18	17	129

353 notifications were sent to persons carrying on food businesses drawing attention to contraventions of the Regulations.

Registered premises

	Number	Inspections
Under Food and Drugs Act, 1955 — Section 16:		
Ice Cream	361	282
Potted, pressed, pickled and preserved food and sausages	136	335
Under Milk and Dairies Regulations:-		
Dairies	4	44
Milk distributors	105	82

Ice Cream (Heat Treatment) Regulations

141 samples of ice cream were submitted to the methylene blue test, which is a Ministry recommended measurement of bacterial cleanliness. The recommended provisional grading, based on this test, is as follows:-

Time taken to reduce methylene blue	Provisional Grade
Fails to reduce in 4 hours	1
2½ — 4 hours	2
½ — 2 hours	3
0 hours	4

The majority of the samples from any one producer should fall into grades 1 or 2.

Manufacturer	No. of samples taken	Provisional Grade			
		1	2	3	4
A	5	3	1	1	—
B	4	3	1	—	—
C	1	1	—	—	—
D	32	29	3	—	—
E	6	6	—	—	—
F	11	10	1	—	—
G	47	17	9	10	11
H	1	1	—	—	—
I	33	30	2	1	—
J	1	1	—	—	—

Food Prosecutions

(a) Breaches of the Food Hygiene Regulations

Description of Premises	No. of Offences	Fine Imposed
Restaurant	8	£125, plus 20 gns. costs.
Bakery	10	£175, plus 10 gns. advocate's fee.
Amusement centre and Social Club	18	£500, plus 20 gns. advocate's fee.
Public House	8	£85, plus 5 gns. advocate's fee.
Fish and Chip Shop and Restaurant	6	£75, plus 5 gns. advocate's fee.

All the above offences were admitted by the defendants concerned.

Each of Section 2 of the Food and Drugs Act, 1955

A firm of drug manufacturers was fined £20, plus advocate's fee of 5 gns, after pleading guilty to selling energy reviving tablets which were deficient in one ingredient (copper sulphate).

CLEAN AIR

Measurement of air pollution

As participants in the National Survey of Air Pollution, the Council continued to co-operate with the Warren Spring Laboratory by taking daily measurements at five stations in the City.

Prior approval of furnace installations

30 applications for prior approval of furnace installations were received and dealt with.

Smoke Control Areas.

As a preliminary step to considering the creation of a smoke control area, a house-to-house survey, entailing 1444 visits, was conducted in an area based on the former Ber Street/King Street Clearance Area and extending into part of the commercial centre of the City.

PUBLIC CLEANSING AND PUBLIC CONVENIENCES

No. of vehicle loads of house and trade refuse disposed of ...	...	...	...	14,039
Income accruing from collection and disposal of trade refuse. ...	...	...	...	£3,189*
Income accruing from traders conveying refuse to the tip. ...	...	...	...	£2,671*
No. of cesspools at end of year. ...	...	...	...	49
No. of pail closets at end of year. ...	...	...	...	50

Transport and other equipment —

Refuse collection vehicles	...	...	22
Cesspool emptier	...	...	1
Night soil collection	...	...	1
Lorries	...	...	4
Vans	...	...	4+
Bulldozers	...	...	2
Loading shovel	...	...	1

Public conveniences —

Structures containing ladies' and gents' toilets	...	9
Structures containing gents' toilets only	...	3
Structures containing urinals only	...	3

* These figures relate to the 1967/8 financial year

+ Includes 1 van for drain testing and clearing etc., and 2 vans for rodent control work.

The report of the Government's Working Party on "Refuse Collection and Storage" was published in May. The report made it clear that the skip system of refuse collection, whereby refuse is transferred from the dustbin to a skip and thence to the vehicle (as practised in Norwich) was no longer acceptable. As an alternative to the skip system they recommended the introduction of either (a) disposable paper sacks for storage of refuse in place of the traditional galvanised dustbin or (b) dustless loading of refuse by means of a specially-constructed bin with a hinged lid. The outcome of this report was a request by the Health Committee for detailed proposals as to the best way of implementing the Working Party's recommendations in Norwich. The matter was still under consideration at the end of the year, as were other matters relating to the disposal of abandoned vehicles and other refuse.

In April, the Health Committee introduced a charge for emptying cesspools over and above once per quarter. At the same time the City Engineer was asked to proceed with a scheme aimed at reducing the number of cesspools in use. As a result the number of emptyings fell from 917 to 585 in the year and 6 premises were connected to the main sewer.

So far as the public conveniences are concerned, it is evident that two of the buildings, i.e. at Tombland and at Prince of Wales Road require major renovations and provision has been made in the Capital Programme, phased over 5 years, for improvement of these conveniences and the provision of three additional structures to meet the growing needs of the public.

REPORT OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER

VII.—SCHOOL HEALTH
SERVICE

INTRODUCTION

I have the honour to submit the Annual Report on the School Health Service for the year 1967. This is the 60th Annual Report of the Principal School Medical Officer for the City of Norwich.

School Children on Register

The number of children on the register at the end of the year was 19,728. This compares with a figure of 19,577 for last year or 19,195 in 1964. It is interesting to note the figure for 30 years ago was 17,509.

School Medical Inspections.

The findings of the nutritional state of children at medical inspection was extremely satisfactory. In only 0.12% of those children examined was found to be unsatisfactory.

The figures for the number of defects found at medical inspection merit a little examination. The actual number of inspections carried out during the year was 6,243 as compared with 6,281 for the preceding year. There was therefore, no great change in the number of inspections. The actual number of defects found was, 3,495 which compares with a figure of 3,405 for the preceding year. This slight increase in defects can readily be attributed to a different interpretation by different members of staff but the number of defects found to need treatment increased from 817 in 1966 to 1,092 in 1967.* This represents an increase of some 33% and needs watching. When one looks at the individual factors that gave rise to the increase one finds that 102 skin defects were found needing treatment in 1966 against 179 in 1967. The breakdown of these figures under some heads reveals the following:

1966	Verrucae	31;	Warts	16;	Eczema	13;	Athlete's Foot	11	Impetigo	17
1967	„	40;	„	23;	„	21;	„	„	17	„

One other heading that has gone up quite a good deal though the numbers are relatively small is the number of cases of squint found – 21 in 1966 and 52 in 1967. The number of hearing defects also increased from 14 to 41 in 1967.

*Formula used to calculate the standard error of the difference between the proportions in 1966 and 1967.

$$= \sqrt{\frac{p \times q}{n_1} + \frac{p \times q}{n_2}}$$

where p is the proportion of defects needing treatment, q the proportion of defects not needing treatment, n_1 and n_2 the number of defects.

The difference between the proportion of defects needing treatment (7.3) exceeds twice the standard error (2.14).

∴ Statistically Significant.

Enuresis Clinic

The number of cases that attended this year was 110 compared with 107 the previous year. As usual, the emphasis is on boys, there being 81 boys to 29 girls. For some inexplicable reason the number not improved by this line of treatment this year was 25% compared with 20% the year previously. This department now has some 20 alarms.

Minor Ailments

Minor Ailment Clinics continue to be held on the same scale as previously. The numbers treated, however, are still showing a downward trend. The figure for the year under review was 4,308 which compares with 5,425 for 1966 and 6,848 for 1965.

Last year I remarked that the number of cases of Otorrhoea treated at Minor Ailment Clinics had risen from an average of 32 for the preceding four years to 42. The number this year has dropped to 29. It is interesting to recall that this is approximately one-sixth of the numbers treated by the School Health Service in 1937.

The figures for Ringworm of scalp are extremely satisfactory, no cases having come to our notice during the year and only one of Ringworm of the body. This again, as I commented last year, is in dramatic contrast to the pre 1939-1945 war years.

It is interesting to note that the number of Warts treated at the Minor Ailment Clinics fell from 604 in 1966 to 498 in 1967. The number of Plantar Warts have, however, shown a slight increase from 585 to 602.

Cleanliness

The number of examinations for cleanliness made during 1967 was 47,221. This compares with 49,884 examinations during 1966. The drop is explained by staffing difficulties. Only 103 children were excluded compared with 140 during the preceding year. The average for the preceding five years, however, was only 71, so there does appear to be a slight tendency to increased uncleanliness. Last year it was noted that schools mainly affected were in one sector of the City and not a sector that one would have expected. This year there would appear to be a scatter throughout the City, and some 66 families were affected, last year the figure was 96. It is also interesting to note that the split by sexes accounted for 32 boys and 71 girls this year whereas the previous year the figures were 37 and 103.

While these figures do not give any grounds for complacency, I really believe that there is no cause for alarm or despondency. This is particularly true when one looks at the current figures for some other areas. An examination of the reports of some Northern towns which we happen to have in the department gave figures varying from 2.8 to 8.18% of all schoolchildren. The last available national figure was 2.63% in 1965. In the light of these figures our percentage 0.52 I think, assumes proper proportions.

Speech Therapy

Last year I commented on the fact that we had been fortunate in securing the services of a second Speech Therapist.

The figures reflect this, in that the number of children treated has grown from 212 to 280.

School Dental Service

The Principal School Dental Officer in writing his last report paints in vivid colours the difference in School Dental Health between when he assumed office some 22 years ago and the present day.

On turning up the report for 1951 I notice that in April of that year the Committee appointed a full-time oral Hygienist and that she was found on Dental Health Education grounds to be a most useful member of staff. Unfortunately this Officer left in January 1953 and has never been replaced. These personnel are indeed in short supply.

There must indeed be extremely few areas in the country where schoolchildren enjoy yearly dental inspection and infants bi-annual dental inspection at the hands of the School Dental Service.

Infectious Disease

459 cases of Measles among schoolchildren were notified compared with 319 in 1966 and 731 in 1965. At the time of writing a Measles vaccine is available for schoolchildren, and this it is hoped, will remove yet another cause of morbidity from amongst children.

Just as, and I hope it is shortly to be in the past, we speak of Measles years it seems we should also speak of Dysentery years. In 1966 there were 583 cases among schoolchildren — last year I am glad to report that there were only 2. The Table on Page 130 shows the annual incidence.

B.C.G. Vaccination

B.C.G. vaccination was again offered to all 13 year old schoolchildren. The percentage of parents who agreed to have their children tested and if necessary vaccinated was 79.7. This compares with 81.9% in the previous year and 83.3% in 1965. I do hope that parents are not beginning to become complacent about this Health Measure. It is quite true that tuberculosis is not now the problem that it was but it is also equally true that fewer and fewer children will have come in contact with the disease and will therefore be more susceptible. In other words the general level of immunity in the population will go down unless B.C.G. vaccination is employed. The decrease in general incidence of tuberculosis, therefore, makes it all the more important for parents to ensure that the children if necessary are immunised because the disease has not, as yet, and I indeed doubt if it ever will be, completely eradicated. Furthermore, the incidence in this country is very much lower than in other countries, and there is greater amount of travel today and, indeed, a greater degree of immigration to this country. It is noted that the percentage of positive re-actors increased from 3.4 to 5.3 in the case of 13 year old children and 5.7 to 6.4 in the case of older schoolchildren.

Handicapped Pupils

It is noted that the number of handicapped pupils has risen from 252 boys and 136 girls to 271 boys and 163 girls. It is interesting that there always appears to be a sex difference in handicapped pupils in that males predominate. The increase in the figures of this year over last is mainly to be accounted for by an increased number of pupils suffering from defective speech. This is probably to be interpreted as better ascertainment with a more adequate staffing position rather than any increase in the incidence of a defect.

It is a little disquieting to note that only 18 new cases of potentially educationally sub-normal pupils were examined during the year. This figure compares with 42 for the preceding year and the drop is due to the difficulty of filling a vacancy which occurred during the year for an Educational Psychologist.

Deaths of Schoolchildren

Unfortunately 7 schoolchildren died during the year. Two of these deaths were due to road accidents and 2 were due to Leukaemia. The average number of deaths over the past 10 years of schoolchildren has been 6.2.

Provision of School Meals

There is no great change in the numbers partaking of school meals facilities.

Audiometry

All infants are individually audiometrically tested on entering school. This is time consuming and a measure which I introduced within comparative recent years. The findings, however, are interesting and I think fully justify the continuance of the procedure. About 6% of children thus tested by school nurses were referred to the School Doctor together with a total of 137 children suspected to have developed some degree of deafness during their early school years. Hearing loss was confirmed in 142 and of these 94 were referred to the Hospital Consultant.

Acknowledgment

It is with pleasure that I record the continued interest and enthusiasm of all members of the School Health Service and of the Director of Education and his Staff, both teaching and administrative. Without such help and co-operation the School Health Service could not be maintained.

The continued support of the members of the Committee has been, as before, an encouragement throughout the year.



Principal School Medical Officer.

HEALTH DEPARTMENT,
68, ST. GILES' STREET,
NORWICH, NOR 22 E.
TEL. NO. NORWICH 22233 EXT. 300.

Annual Report of the Principal School Medical Officer

(1) (a) **STAFF OF THE SCHOOL HEALTH SERVICE** (as at 31st December, 1967)

MEDICAL STAFF

J. R. MURDOCK, (Mod.), B.A., M.D., D.P.H., D.C.H.
Medical Officer of Health and Principal School Medical Officer

D. B. HILL, M.A., M.B., B.Chir., L.R.C.P., M.R.C.S., D.P.H.
Deputy Medical Officer of Health and Deputy Principal School Medical Officer

CICELY R. HAINES, M.B., Ch.B., D.Obst., R.C.O.G.
Assistant Medical Officer of Health and School Medical Officer

STEPHANIE A. LAING, M.R.C.S., L.R.C.P., (Lond.), D.P.H., D.C.H.
Assistant Medical Officer of Health and School Medical Officer

**MARGARET L. E. CHASTENEY, B.Sc., M.R.C.S., (Lond.),
L.R.C.P. (Lond.), D.Obst. R.C.O.G. (Lond.),**
Assistant Medical Officer of Health and School Medical Officer

R.M. BADMINTON, M.B., Ch.B. (B'ham), D.P.H., D.A., D.Obst. R.C.O.G.
Assistant Medical Officer of Health and School Medical Officer

DENTAL OFFICERS

A. E. SUMMERS, L.D.S. (Glasgow)
Principal School Dental Officer

A. M. WILSON, L.D.S., R.C.S., (Ed.)
School Dental Officer

J. M. MITCHELL, L.D.S., R.C.S. (Ed.)
School Dental Officer

R. A. FELLA, B.D.S. (Glas.)
School Dental Officer

MRS. M. E. CROOK, B.D.S. (St. Andrew's)
School Dental Officer

(1 vacancy)

(1) (b) SCHOOL HEALTH CONSULTANT SERVICES PROVIDED BY THE EAST ANGLIAN REGIONAL HOSPITAL BOARD

Cardiac Clinic:

W. A. OLIVER, M.B.E., M.D., M.R.C.P.

Ophthalmic Clinic:

P. H. BEATTIE, M.D., (Aber.), D.O.M.S. (Eng.)

W. J. NAUNTON, M.A., M.R.C.S., L.R.C.P., M.B., B.Ch., D.O.M.S.

P. J. L. HUNTER, M.B., Ch.B., D.O.M.S.

Otorhinolaryngic Clinic:

Arrangements exist for the School Health Service to make appointments for MR. I. S. YOUNG, M.B., Ch.B. (Glas.) F.R.C.S., (Edin.) D.L.O. and MR. R. J. SELICK, M.B., F.R.C.S. to see cases at their clinics.

(2) GENERAL INFORMATION

The number of school children on the school register at the end of the year was 19,728 compared with 19,577 at the end of 1966. These figures include the numbers on the registers of the non-local education authority schools at which medical inspection is carried out by the authority.

The number of school departments in the city is as follows: —

I. PRIMARY

Infants	19.	3960 children in attendance at end of year
Junior	16.	5592 children in attendance at end of year
Combined		
Junior and		
Infant	4.	1141 children in attendance at end of year

II. SECONDARY

Modern	11.	4938 children in attendance at end of year
Grammar		
(Mixed)	1.	685 children in attendance at end of year
Grammar		
(Boys)	1.	876 boys in attendance at end of year
Grammar		
(Girls)	1.	815 girls in attendance at end of year

At the year end there were some 567 boys in the senior and 79 in the junior department of the King Edward VI School, and 492 girls (seniors) and 178 girls and boys (juniors) at the Notre Dame School, both non-local education authority schools at which we carry out inspections.

III. NURSERY SCHOOL AND CLASSES

Earlham Nursery

School 109 children in attendance at end of year

Nursery Classes 90 children in attendance at end of year

A number of children under 5 years of age were also attending other infant schools.

IV. SPECIAL SCHOOLS

Physically Handi-
capped and

Delicate Pupils 67 children in attendance at end of year

Educationally
Sub-Normal

Pupils 139 children in attendance at end of year

On the 1st September, 1967, the Earlham Secondary Modern Boys' School and the Bluebell Secondary Modern Girls' School were combined as the Earlham and Bluebell School under one Head Teacher, and on the same date the Norman Secondary Modern Boys' School and the Dowson Secondary Modern Girls' School were similarly combined as the Norman Dowson School.

(3) MEDICAL INSPECTION

The age-groups in which medical examinations of school children were carried out remain unchanged, the routine ones being four times during a child's school life.

The number of pupils examined at the Schools during the year, their physical condition, and the extent to which parents attended the periodic medical inspections at the schools was as follows: —

Age Groups Inspected (By Years of Birth)	No. of Pupils Examined	Percent- age of Exams at which Parents were present	Findings			
			Number of those whose Physical Condition Satisfac- tory	No. Requiring Treatment		
				For De- fective Vision	For all other Condi- tions	Total In- dividual Pupils
1963 and later ...	277	96.8	276	2	50	51
1962 ...	1066	96.9	1066	37	157	187
1961 ...	391	95.4	390	16	37	50
1960 ...	154	90.9	154	12	19	30
1959 ...	1436	89.3	1433	40	182	216
1958 ...	100	91.0	100	13	16	28
1957 ...	69	82.6	69	6	8	13
1956 ...	549	82.7	549	22	68	85
1955 ...	782	69.6	782	24	80	103
1954 ...	259	61.8	259	19	28	46
1953 ...	320	24.7	317	13	43	54
1952 and earlier ...	840	18.5	840	28	99	125
Total L.E.A. Schools	6243	74.3	6235 (99.87%)	232	787	988
Non-L.E.A. Schools	224	71.4	224 (100%)	19	31	47
Grand Total	6467	74.2	6459 (99.88%)	251	818	1035

	L.E.A. Schools	Non-L.E.A. Schools
Number of Re-inspections ...	1815	61
Number of Special Inspections ...	1158	1
Total ...	2973	62

Defects found by Medical Inspection during the year ended 31st December, 1967

[These Tables include separately the number of pupils found to require treatment (T) and the number of those pupils which it was found advisable to keep under medical observation (O)]

Table A—Periodic Inspections at L.E.A. Schools

De- fect Code No	Classification of Defects and Diseases	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		Total	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4	Skin	36	35	42	13	101	37	179	85
5	Eye—								
	Vision	62	197	39	75	131	239	232	511
	Squint	33	36	—	3	19	17	52	56
	Other	6	4	1	2	3	3	10	9
6	Ear—								
	Hearing	13	74	4	3	24	85	41	162
	Otitis Media	19	52	1	2	4	36	24	90
	Other	—	4	—	—	2	8	2	12
7	Nose and Throat	42	118	5	12	49	109	96	239
8	Speech	22	34	1	3	20	16	43	53
9	Lymphatic Glands	3	14	—	—	—	10	3	24
10	Heart	8	19	1	1	4	26	13	46
11	Lungs	17	61	—	16	15	53	32	130
12	Developmental—								
	Hernia	2	11	—	—	2	7	4	18
	Other	20	101	15	26	74	177	109	304
13	Orthopaedic—								
	Posture	1	5	3	2	8	28	12	35
	Feet	28	44	8	15	30	53	66	112
	Other	3	52	7	9	15	70	25	131
14	Nervous System—								
	Epilepsy	5	2	2	1	—	4	7	7
	Other	1	10	—	2	4	12	5	24
15	Psychological—								
	Developmental	—	6	8	2	56	10	64	18
	Stability	5	109	1	14	31	137	37	260
16	Abdomen	2	9	1	3	7	22	10	34
17	Other	4	7	9	6	13	30	26	43

**Table B—Special Inspections
at L.E.A. Schools**

De- fect Code No. (1)	Classification of Defects and Diseases (2)	Special Inspections	
		(T) (3)	(O) (4)
4	Skin ...	12	1
5	Eye—		
	Vision ...	83	2
	Squint ...	5	1
	Other ...	4	—
6	Ear—		
	Hearing ...	99	54
	Otitis Media	14	1
	Other ...	2	—
7	Nose and Throat	45	6
8	Speech ...	17	4
9	Lymphatic Glands	—	—
10	Heart ...	1	1
11	Lungs ...	4	—
12	Developmental—		
	Hernia ...	1	—
	Other ...	13	—
13	Orthopaedic—		
	Posture ...	1	1
	Feet ...	2	—
	Other ...	4	1
14	Nervous System—		
	Epilepsy ...	1	—
	Other ...	4	2
15	Psychological—		
	Developmental	19	4
	Stability ...	32	12
16	Abdomen ...	1	—
17	Other ...	4	2

**Table C—Inspections
at Non-L.E.A. Schools**

Periodic Inspections		Special Inspections	
(T) (5)	(O) (6)	(T) (7)	(O) (8)
7	2	—	—
19	18	1	—
1	—	—	—
—	—	—	—
—	3	—	—
—	1	—	—
—	—	—	—
4	1	—	—
—	—	—	—
1	—	—	—
1	—	—	—
1	4	—	—
—	—	—	—
—	4	—	—
4	6	—	—
3	7	—	—
7	7	—	—
—	—	—	—
—	—	—	—
—	—	—	—
1	2	—	—
1	1	—	—
1	1	—	—

(4) TREATMENT

CHURCHMAN HOUSE CLINICS

A clinic is held by a School Medical Officer every Monday morning at Churchman House. This enables School Medical Officers to refer cases from medical inspection so that they can be followed up in more detail than is possible at a school medical inspection.

A special clinic for bed-wetters is also held weekly.

In addition, school children with minor ailments are seen each morning at headquarters by the School Nurse.

ENURESIS CLINIC

A special clinic for the investigation and treatment of pupils who are bed-wetters is held at the Health Department weekly and during the year 110 children were seen. No physical defects were found in any case which would account for the wetting and only 4 were thought to be so maladjusted that they required to be referred to the Child Guidance Clinic. In all other cases the cause of wetting was considered to be due to failure of early training, or mild emotional disturbance insufficiently severe to warrant full scale Child Guidance Clinic investigation. Correct training requires considerable patience and coaxing. Anger worsens the condition.

A few simple rules and general advice on the attitude to be adopted towards the child are given to the parents. Much can be done for the child by explaining to him that his condition is far from being unusual and that there are certain to be others in his school with similar symptoms. Use of the alarm bell system has continued, and the apparatus has been loaned to 63 children during 1967.

The following is a statistical summary for the year: —

Year of Birth and Sex		No. Discharged	No. Defaulted	No. Referred to Child Guidance Clinic	No. under Observation at Year End	Total
1962	M	—	—	—	—	—
	F	—	—	—	1	1
1961	M	1	1	—	1	3
	F	1	—	—	2	3
1960	M	2	2	2	6	12
	F	—	1	—	2	3
1959	M	5	1	—	11	17
	F	1	—	1	—	2
1958	M	8	2	—	4	14
	F	3	1	—	3	7
1957	M	6	1	1	2	10
	F	2	—	—	—	2
1956	M	4	1	—	5	10
	F	1	—	—	1	2
1955	M	3	1	—	1	5
	F	—	1	—	—	1
1954	M	1	1	—	1	3
	F	1	—	—	1	2
1953	M	3	—	—	—	3
	F	1	—	—	2	3
1952	M	3	1	—	—	4
	F	2	—	—	—	2
1951	M	—	—	—	—	—
	F	1	—	—	—	1
Totals	M	36	11	3	31	81
	F	13	3	1	12	29

The table above shows the result for the year under review. Some children respond to treatment in a matter of a few months, in others a cure is effective after perhaps eight or nine months and some children we do not seem to be able to help. From the table which follows below this latter is something of the order of 25%. Experience suggests that the primary bed-wetter, constantly wet and with no serious emotional disorder, is most likely to respond to the alarm which we have now been using since May, 1961. This is the child in whom bed-wetting is primarily a habit disorder, where for some reason training at the usual age has been ineffective.

Age at issue of Alarm	Dry	Improved	Not Improved
5	1	1	—
6	13	2	5
7	7	2	12
8	22	5	9
9	19	3	4
10	13	2	5
11	6	3	4
12	6	3	—
13	9	4	3
14	6	3	—
15	1	1	1
Total	103 (59.2%) (77 boys 26 girls)	29 (16.1%) (22 boys, 7 girls)	43 (24.7%) (29 boys 14 girls)

This table records individual children, of whom 13 boys and 8 girls had become dry after using the alarm on a previous occasion but later relapsed. Of these, 6 boys and 6 girls again became dry after the second issue, the condition of 4 boys and 1 girl was improved, and of 2 boys and 1 girl unimproved.

There were also 9 boys and 3 girls who, having made little or no progress after using the alarm on a previous occasion, were given a further trial when older. Of these 2 boys and 1 girl became dry after the second issue, the condition of 4 boys and 1 girl was improved and of 3 boys and 1 girl not improved.

DISTRICT MINOR AILMENT CLINICS

Weekly sessions were held at thirteen schools situated in various parts of the city.

The following is a summary of the defects treated: ---

	(a) At Churchman House	(b) At District Clinics	(c) Others of which we know (e.g. General Practitioner, Hospital, etc.)	(d) Total
Ringworm of the Head	—	—	—	—
Ringworm of the Body	—	—	1	1
Impetigo	—	2	7	9
Cabies	8	—	—	8
Scne	2	165	15	182
Warts (excluding Plantar Warts)	29	455	14	498
Plantar Warts	158	431	13	602
Minor Injuries	10	697	2	709
Septic Sores	13	98	5	116
Other Skin Diseases	21	1891	81	1993
Elepharitis	—	69	1	70
Conjunctivitis	—	20	—	20
Other Minor Eye Defects	1	111	4	116
Torrhoea	1	4	24	29
Other Ear Defects	1	2	49	52
Defects of Nose and Throat	—	14	53	67
Enlarged Glands	—	—	1	1
Other Defects	—	111	52	163

OPHTHALMIC CLINIC

Pupils suffering from defective vision or squint are referred to an Ophthalmic Surgeon by the School Medical Officers. Occasionally cases are referred by General Practitioners through School Health channels.

School Ophthalmic Clinics are held at the Out-Patient Department of the Jenny Lind Hospital in the charge of Dr. P. H. Beattie. Normally three sessions are held weekly, viz: —

Wednesday at 9 a.m. - Mr. P. J. L. Hunter

Wednesday at 11 a.m. - Dr. P. H. Beattie

Thursday at 9.15 a.m. - Dr. W. J. Naunton

A clinic is also held as required, on alternate Wednesdays at 1.30 p.m., conducted by an Ophthalmic Registrar. This additional clinic is necessary in order to keep the number on the waiting list to a minimum.

Appointments are made through the School Health Service, but the dispensing of spectacles is arranged through the National Health Service.

As considered necessary by the Ophthalmic Surgeon, orthoptic treatment and investigation is carried out at the Norfolk and Norwich Hospital.

129 sessions were held on our behalf by the Ophthalmic Specialists during the year.

Eye Diseases, Defective Vision and Squint

	Number of Cases known to have been dealt with
External and other, excluding errors of Refraction and Squint ...	206
Errors of refraction (including Squint)	
(i) Pupils at L.E.A. Schools ...	1085
(ii) Pupils at Non-L.E.A. Schools	27
Total ...	1318
Total number of pupils for whom spectacles were prescribed	
(i) Pupils at L.E.A. Schools ...	487
(ii) Pupils at Non-L.E.A. Schools	9

CARDIAC CLINIC

Facilities exist for the School Health Service to arrange for children to be seen at a Cardiac Clinic held by Dr. W. A. Oliver, M.B.E., under the aegis of the Regional Hospital Board.

Appointments are made through the School Health Service, and the Health Visitors visit in advance to obtain environmental reports. The clinic arrangements are made by the Regional Hospital Board.

During the year 39 school children (including 6 new cases) were examined and the following diagnoses were made: --

	New Cases	Old Cases
Atrial Septal Defect	—	4
Ventricular Septal Defect	1	11
Patent Ductus Arteriosus	1	2
Pulmonary Stenosis	—	2
Aortic Stenosis	1	2
Fallot's Tetralogy	—	3
Innocent Systolic Murmur	3	7
Coarctation of Aorta	—	2

34 of these children had no restriction placed on their physical activities. 3 were debarred from competitive sport, and 2 debarred from all organised physical activities.

DISEASES OF EAR, NOSE AND THROAT

(a) Treatment of Otitis Media

As with other minor ailments, children suffering from otitis media who attend schools near the centre of the city may be treated at the Central Clinic at Churchman House, while those on the outskirts are treated at the District Clinics.

The cases treated have come to notice through various agencies, but chiefly through the School Medical Staff and Head Teachers.

When considered advisable, cases are referred for examination by the specialist at the Out-Patient Departments of the Jenny Lind and the Norfolk and Norwich Hospitals and treatment continued or modified according to his findings.

10 new cases were referred to the Ear Specialist during the year, and 4 cases which had recurred.

One child was treated at the Central Clinic at Churchman House, and 4 received treatment at the District Minor Ailments Clinic.

24 children are known to have been treated otherwise by general practitioners or hospital specialists.

The following table shows the total number of cases of otitis media in school children treated by the local authority and otherwise during the last ten years.

	(a) At Churchman House	(b) At District Clinics	(c) Others of which we know (e.g. General Practitioner, Hospital, etc.)	(d) Total
1967	1	4	24	29
1966	—	6	36	42
1965	—	3	24	27
1964	1	7	24	32
1963	—	11	19	30
1962	1	12	24	37
1961	—	14	31	45
1960	—	9	47	56
1959	—	9	37	46
1958	1	3	13	17

(b) Tonsillectomy 1960—67

The Jenny Lind Hospital tells us monthly of the children whose tonsils and adenoids were removed in the hospital.

The following are the yearly figures thus obtained:

1960	...	...	368	1964	...	...	270
1961	...	...	313	1965	...	...	276
1962	...	...	255	1966	...	...	318
1963	...	...	200	1967	...	...	254

The numbers and ages of the school children who had this operation in 1967 were as follows: —

Age	Boys	Girls	Total
4 Years	8	—	8
5 „	33	35	68
6 „	37	42	79
7 „	21	19	40
8 „	12	13	25
9 „	9	12	21
10 „	4	5	9
11 „	1	2	3
12 „	1	—	1
Total	126	128	254

(c) Arrangements for the Ascertainment and Treatment of Children with Defective Hearing

As before, the hearing of school children was checked as part of the routine school medical examination during the first year at school.

The rapid sweep method using a pure tone audiometer was employed.

Any children failing in this test are referred to one of the School Medical Officers for further testing, and children of other ages about whose hearing ability there is any doubt, are similarly referred.

If the presence of deafness is confirmed, then arrangements are made (with the approval of the family doctor) for the child to be examined by an otologist.

The following table shows the number of children tested audiometrically during the year, and the results obtained: —

	Entrants
No. of children audiometrically tested at school by School Nurses	2142
No. of children referred to School Medical Officer for further test	129
No. referred from previous year	11
No. of children found to be deaf on re-testing:	
—In both ears	59
—In one ear only	19
No. of children whose hearing was found to be within normal limits on re-testing	44
No. of children awaiting re-testing at end of year	18
	Other Pupils Referred
No. of other children referred to School Medical Officer for testing	137
No. of children found to be deaf on testing:	
—In both ears	38
—In one ear only	26
No. of children whose hearing was found to be within normal limits on testing ...	62
No. of children awaiting test at end of year	11

(d) Special Classes for Partially Hearing Children

Special classes for partially hearing children were commenced in September, 1956, at the Lakenham Junior School.

A group hearing aid and loop system considerably facilitates the class teaching and oral work. Children find it a great help and have been able to take part in class work to a degree which never before has been possible for them.

During the year a second Teacher of the Deaf was appointed. These teachers undertake auditory training and speech training of partially hearing pupils, as well as giving guidance to parents of deaf children not yet of school age. Boys and girls discharged from the special class are visited periodically at their own schools in order to ascertain progress. Furthermore they attend the Otologists' clinics at the hospital.

During the year 5 boys and 3 girls commenced attendance at the special classes. 2 boys returned to full term attendance at ordinary schools.

At the end of 1967 8 boys and 5 girls were in full time attendance, including 1 girl from a County School by an arrangement with the Norfolk County Education Authority.

In addition 30 boys and 30 girls were receiving periodic help from the Teachers of the Deaf.

Diseases and Defects of Ear, Nose and Throat

	Number of Cases known to have been dealt with
Received Operative Treatment—	
(a) for diseases of the ear	26
(b) for adenoids and chronic tonsillitis	254
(c) for other nose and throat conditions	9
Received other forms of treatment ...	148
Total ...	437
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) In 1967	6
(b) In previous years	35

ORTHOPÆDIC TREATMENT

Children suffering from orthopædic defects are referred by the School Medical Officers from school medical inspections, school clinics, etc., and are seen (with the approval of the family doctor) by the Orthopædic Surgeons at their out-patient clinics at the Jenny Lind and Norfolk and Norwich Hospitals. The initial appointments are sent to the parents through the School Health Service and the Orthopædic Specialists report on all new cases seen. Treatment such as the supply of surgical boots and instruments, and the wedging of footwear, is arranged by the specialists through the Hospital Service.

20 children attending Primary Schools and 12 attending Secondary Schools were referred during the year as new cases, and 10 Primary School Children and 14 Secondary School Children continued treatment from the previous year.

The following table shows the diagnosis of the children seen by the Specialists: —

Diagnosis	New Cases attending		Old Cases attending		Total Cases attending	
	Primary Schools	Secondary Schools	Primary Schools	Secondary Schools	Primary Schools	Secondary Schools
Hy Posture ...	4	1	1	1	5	2
Foot ...	2	1	1	1	3	2
us Ankles ...	1	—	3	—	4	—
Toe ...	1	—	—	—	1	—
ging ...	1	—	—	—	1	—
Valgum ...	2	1	2	1	4	2
es ...	2	1	—	2	2	3
ysis due to						
oliomyelitis ...	—	—	—	1	—	1
tic Paralysis ...	1	—	—	1	1	1
a Bifida ...	1	—	—	2	1	2
do Hyper-						
rophic Muscu-						
r Paralysis ...	—	2	—	1	—	3
ochondritis ...	—	—	3	1	3	1
genital Disloca-						
on of Hip Joint	1	2	—	—	1	2
ellaneous ...	4	2	2	3	6	5
Totals ...	20	10	12	14	32	24

With regard to slight postural defects which are so prevalent amongst scholars attending the Secondary Grammar Schools special exercises are conducted for these children by the Teachers of Physical Education.

Orthopaedic and Postural Defects

	Number of Cases known to have been treated
(a) Pupils treated at clinics or out-patients departments ...	56
(b) Pupils treated at school for postural defects ...	61
Total ...	117

RINGWORM

No. of Schoolchildren Treated

		By Local Authority	Otherwise	Total
Ringworm Scalp	...	—	—	—
Ringworm Body	...	—	1	1

No new cases of Ringworm of the Scalp were notified by the Hospital Authority during the year in children attending schools in Norwich.

UNCLEANLINESS

Children at school are examined periodically for uncleanness. Any child whose person or clothing is found to be in a verminous or filthy condition is immediately excluded from school (except in the case of a first offence where the condition is a very slight one), and a notice acquainting the parent of the position is posted on the same day.

This notification is followed up as soon as possible by a home visit from the Health Visitor who advises the parent on the best method of cleansing and endeavours to persuade any contacts to attend for examination.

A certificate of fitness has to be obtained either from the family doctor, or from the Medical Officer or Nurse at the nearest Minor Ailments Clinic before the child is permitted to return to school.

It has been unnecessary for many years to examine the pupils at the City of Norwich School and the Hewett School.

Infestation with Vermin

(a)	Total number of individual examinations of pupils in Schools by the School Nurses and other authorised persons	37221
(b)	Total number of individual pupils found to be infested:-	
	(i) by School Nurses, etc. ...	103
	(ii) by Medical Officers ...	Nil
(c)	Number of individual pupils in respect of whom cleansing notices were issued:-	
	(1) Under Section 54(2) of the Education Act, 1944 ...	Nil
	(2) Under Section 73 of the Norwich Corporation Act, 1933 ...	7
(d)	Number of individual pupils in respect of whom cleansing orders were issued under Section 54(3) of the Education Act, 1944 ...	Nil
(e)	Number of individual pupils compulsorily cleansed under arrangements made by the Local Education Authority ...	Nil
(f)	Number of individual pupils cleansed at parents' request under arrangements made by the Local Education Authority	14
(g)	Number of individual pupils cleansed by parents ...	89

Of the total school child population, 0.52% were found during the year to have verminous heads, compared with the last available national figure of 2.63% in 1965.

No children were excluded on account of uncleanness of clothing during the year.

With a view to promoting cleanliness in the schools, 69 tubes of insecticidal hair preparation were issued during the year from the Department free of charge to parents.

SPEECH THERAPY

At the end of the year two Speech Therapists were employed by the local Education Authority for a total of nineteen sessions weekly.

Cases are referred by the doctors from School Medical Inspections, School Clinics and Infant Welfare Centres; by the Health Visitors, the Head Teachers, and occasionally by Hospital Consultants and Family Doctors.

The following table shows the diagnosis of the 267 school children and 13 children under school age treated during the year: —

Diagnosis	No. of New Cases Treated	No. of Old Cases Treated	Total Cases Treated	% of all types of Cases Treated	Discharged as cured (by defect)	
					No.	%
Stammer ...	19	27	46	16.4	4	8.7
Cleft Palate ...	4	4	8	2.9	—	—
Spastic ...	1	2	3	1.1	—	—
Dyslalia ...	45	60	105	37.5	28	26.7
Nasal Speech ...	4	—	4	1.4	—	—
Delayed Speech	14	27	41	14.6	9	22.0
Sigmatism ...	20	15	35	12.5	12	34.3
Indistinct or fast Speech ...	7	12	19	6.8	5	26.3
Other ...	10	9	19	6.8	7	36.9

At the end of the year 172 cases were attending the Centres for treatment, and 69 other cases were under observation. 16 new cases were awaiting appointments.

A total of 4815 attendances were made at the Centres during the year by school children, and 109 by children under school age.

A close liaison exists between the Speech Therapist and Head Teachers, the Teacher for the Deaf, the Child Guidance Clinic and School Medical Staff.

CHILD GUIDANCE

The Consultant Psychiatrist is Dr. C. D. Roberts.

During the year, 99 Primary, 68 Secondary and 17 Special School Children and 23 other children (under school age, private schools, etc.) were treated at the Clinic, which is held at premises formerly the Philadelphia Infant School, Aylsham Road.

140 clinics were held, the total number of attendances made being 2910.

71 new cases were seen, having been referred from many different sources. An analysis of the sources of referral and the symptoms for which they were referred is given in the tables below: —

Source	No. of New Cases Referred
School Psychological Service (Teaching and Medical Staff &c.	31
Parents and Guardians	4
General Practitioner	22
Hospital Consultants	7
Juvenile Court	2
Children's Officer	3
Probation Officers	2
	71

Reason for Referral	Boys	Girls	Total
Nervous Disorders (Fears, unsociability, moodiness &c) ...	9	10	19
Habit Disorders (Sleep, movement and speech disorders, incontinence, &c)	7	7	14
Behaviour Disorders (Beyond control, stealing, truancy, Unmanageableness &c)	19	8	27
Juvenile Delinquency	—	2	2
Educational Difficulties (Daydreaming, school failure &c) ...	4	1	5
Diagnostic Examination (Appraisal of subnormal behaviour, Autism, special placements.) ...	—	4	4
	39	32	71

During the year the usual close liaison between the clinic and the Juvenile Court was maintained and 26 cases were reported on for the information of the Magistrates. All Norwich children remanded to Bramerton Home are the subjects of reports by the Clinic staff.

The Clinic continues to operate on a basis of three half day sessions (Tuesday morning and afternoon and Friday afternoon) per week.

(5) SCHOOL DENTAL SERVICE

The Principal School Dental Officer reports: —

Dental Staff

Mrs. M. E. Crook was appointed to the staff on 1st March 1967, increasing the effective strength for the year to just under five Dental Officers.

Dental Inspection and Treatment

Due to the appointment of another Dental Officer there was an overall increase in all forms of treatment, and it was possible to inspect all senior and junior schools, and most infant schools were visited twice during the year. This accounts for nearly 3000 more reinspections at the schools or clinics.

It has been noted that more and more children are having treatment under the General Dental Service. Although the number of children requiring treatment appears to be high, a large number of these children are obviously attending regularly at private dental surgeries and are therefore not offered treatment.

The caries rate is still too high and the state of oral hygiene in many cases could still be improved but the great majority seem to be having regular dental treatment.

It is satisfactory to note that more parents are realising the importance of the care of the temporary teeth and during the year 1000 more fillings were inserted in these teeth.

Equipment

A new unit, chair and operating light were installed in the main surgery at the Unthank Road Clinic, and in the other surgeries modern high speed turbine hand pieces were fitted.

As in previous years several patients were referred to Specialists at the West Norwich Hospital for surgical and orthodontic treatment—a service which is greatly appreciated.

Looking back on 22 years service, it is obvious that the whole pattern of school dentistry has changed radically since the war.

Prior to the introduction of the National Health Service in 1948 and for several years thereafter, the School Dental Service was seriously understaffed and most of the Dental Officers' time was taken up with the treatment of emergencies. It was only possible to inspect very few schools each year and consequently the state of children's teeth was poor and the number of casualties attending with toothache was correspondingly high. At one time school inspections had to be suspended altogether because of lack of staff. When regular school inspections were resumed it was noted that dental caries was widespread and it was exceptional to see children who had had any teeth conserved by fillings.

The situation steadily improved and now with yearly school inspections and bi-annually for infants, and with more and more children attending the General Dental Service for regular treatment, the school children of Norwich are exceedingly well cared for dentally—only parental ignorance and apathy causing the very small proportion of neglected mouths. The caries rate is still high but the great majority of children are having regular treatment.

In spite of films and demonstrations, talks and posters, tooth-brushes are not used enough, too much carbohydrate is consumed, especially between meals and the School Tuck Shop is still selling sticky sweets and biscuits which cling around the teeth all day. At one time apples were on sale at some schools and this is an idea that should be encouraged.

Dental Inspection and Treatment carried out by the Authority during
the year ended 31st December, 1967

(a) *Attendances and Treatment*

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	1670	1321	231	3222
Subsequent visits	2102	2413	290	4805
Total visits	3772	3734	521	8027
Additional courses of treatment commenced	255	150	28	433
Fillings in permanent teeth ...	1663	3376	559	5598
Fillings in deciduous teeth ...	2278	98	—	2376
Permanent teeth filled ...	1297	2806	476	4579
Deciduous teeth filled ...	1933	85	—	2018
Permanent teeth extracted ...	78	405	65	548
Deciduous teeth extracted ...	1212	564	—	1776
General Anæsthetics ...	564	318	25	907
Emergencies	247	106	19	372

Number of pupils X-rayed ...	163
Prophylaxis	324
Teeth otherwise conserved ...	1456
Number of teeth root filled ...	3
Inlays	—
Crowns	1
Courses of treatment completed	3287

(b) *Orthodontics*

Cases remaining from previous year	...	57
New cases commenced during year	...	20
Cases completed during year	...	13
Cases discontinued during year	...	7
No. of removable appliances fitted	...	31
No. of fixed appliances fitted	...	—
Pupils referred to Hospital Consultant	...	11

(c) *Prosthetics*

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time) ...	—	—	—	—
Pupils supplied with other dentures (first time) ...	2	11	2	15
Number of dentures supplied	2	12	2	16

(d) *Anaesthetics*

General Anaesthetics administered by Dental Officers ... 907

(e) *Inspections*

(a)	First inspection at school. Number of pupils	16931
(b)	First inspection at clinic. Number of pupils	1059
	Number of (a) + (b) found to require treatment	11373
	Number of (a) + (b) offered treatment ...	7136
(c)	Pupils re-inspected at school clinic ...	3487
	Number of (c) found to require treatment	2353

(f) *Sessions*

Sessions devoted to treatment	...	...	...	1838
Sessions devoted to inspection	...	...	...	277
Sessions devoted to Dental Health Education by School Dental Officers	...	...	...	3

(g) *Children under 5 years of age who attend no school*

First visit	...	...	...	...	...	70
Subsequent visits	...	...	...	...	...	40
Total visits	...	...	...	...	...	110
Additional courses of treatment commenced	...	...	...	...	...	6
Fillings	...	...	...	...	...	94
Teeth filled	...	...	...	...	...	72
Teeth extracted	...	...	...	...	...	64
General Anaesthetics	...	...	...	...	...	39
Emergencies	...	...	...	...	...	21
Number of patients X-rayed	...	...	...	...	...	—
Prophylaxis	...	...	...	...	...	1
Teeth otherwise conserved	...	...	...	...	...	55
Courses of treatment completed	...	...	...	...	...	68

(6) INFECTIOUS DISEASES
INFECTIOUS DISEASES NOTIFIED, 1967

SCHOOL OR SCHOOL GROUP	Number on Roll at end of Year	Diphtheria			Scarlet Fever	Measles	Whoop- ing Cough	Food Poison- ing	Resp. T.B.	Non. Resp. T.B.	Dysen- tery	Jaundice	Ac. Polio- myelitis	
		Cases	Carriers	Contacts Excluded									Cases	Contacts Excluded
Alderman Jex	361	-	-	-	-	-	-	-	-	-	-	-	-	-
Angel Road ...	542	-	-	-	5	16	2	-	-	-	-	-	-	-
Avenue Road ...	620	-	-	-	4	38	2	-	-	-	-	-	-	-
Bignold	438	-	-	-	2	31	2	-	-	-	-	-	-	-
Blackdale	273	-	-	-	-	-	1	-	-	-	-	-	-	-
Bull Close	141	-	-	-	2	61	-	-	-	-	-	-	-	-
Catton Grove ...	538	-	-	-	7	-	1	-	-	-	-	-	-	-
Cavell	252	-	-	-	2	-	2	-	-	-	-	-	-	-
Clarkson	195	-	-	-	6	22	2	-	-	-	-	-	-	-
Colman Road ...	701	-	-	-	1	2	3	-	-	-	-	-	-	-
Crome/Stuart ...	279	-	-	-	-	-	-	-	-	-	-	-	-	-
Earlham/Bluebell	1018	-	-	-	2	-	-	-	-	-	-	-	-	-
George White ...	416	-	-	-	2	-	-	-	-	-	-	-	-	-
Gurney	391	-	-	-	1	-	-	-	-	-	-	-	-	-
Heartsease	1329	-	-	-	14	26	2	-	-	-	2	-	-	-
Henderson	404	-	-	-	-	-	-	-	-	-	-	-	-	-
Lakenham	1544	-	-	-	6	19	1	-	-	-	-	-	-	-
Larkman Lane	671	-	-	-	3	28	5	-	-	-	-	-	-	-
Mousehold Avenue	189	-	-	-	9	21	4	-	-	-	-	-	-	-
Nelson Street ...	224	-	-	-	3	33	3	-	-	-	-	-	-	-
Norman and Dowson	1084	-	-	-	9	25	1	-	-	-	-	-	-	-
North Earlham	125	-	-	-	-	-	-	-	-	-	-	-	-	-

Amongst children attending Private Schools 1 case of Scarlet Fever, and 1 of Dysentery were notified.

B.C.G. Vaccination

B.C.G. Vaccination was again offered to all 13-year-old school children, and older school children not already vaccinated.

79.7% (81.9% in 1966) parents of 13-year-old children gave their consent.

The findings during the year were as follows: —

	No.	Heaf Tests Positive	%	No. Vaccinated with B.C.G.
13-year-old children	806	41	5.3	720
Older school children	701	43	6.4	619

The positive reactors were referred to the Consultant Chest Physician.

Tuberculin Testing of School Entrants

During the year Heaf tests have continued to be carried out at the time of the first routine school medical inspection, of all entrants to Infant Schools whose parents have given written permission for this to be done.

The parents are informed by letter of the result, and particulars of those children who are positive reactors are given to the Chest Physician for following-up.

The number of tests carried out during the year and the results obtained were as follows: —

No. of of Entrants Examined	No. Heaf Tested	No. whose parents declined the Test	No. of Negative Reactors	No. of Positive Reactors	No. absent at time of Reading
1775	1496	279	1408	65	23

Of the 65 children who gave positive reactions 49 were from families already known to the Chest Physician, having previously had B.C.G. vaccination, and 16 were found to be normal after investigation.

Poliomyelitis Vaccination

During the year 147 school children were given a course of 3 doses, and 1178 were given the fourth dose. Oral vaccine was used.

(7) HANDICAPPED PUPILS

The following table shows the number of boys and girls in each category, and the type of school at which each was in attendance in December, 1967.

Pupils suffering from more than one handicap have been classified under the major handicap.

Category	Handicap	At Special School				At Ordinary School		At Home		Total	
		Residential		Day		Boys	Girls	Boys	Girls	Boys	Girls
		Boys	Girls	Boys	Girls						
A	Blind Pupils	—	—	—	—	—	—	—	—	—	—
B	Partially Sighted Pupils	2	—	—	—	1.b	—	—	—	3	—
C	Deaf Pupils	—	2	—	—	—	—	—	—	—	2
D	Partially Hearing Pupils	1	1	1	—	41.a	33.a	—	—	43	34
E	Educationally Subnormal Pupils	2	—	75	57	1.b	1.b	1	1	79	59
F	Pupils suffering from Severe Epilepsy	—	2	—	2	1	1	—	—	1	5
G	Maladjusted Pupils	4	—	1	1	4.c	—	1.e	—	10	1
H	Physically Handicapped Pupils	—	—	13	8	2.b	—	4.e	3.e	19	11
I	Pupils suffering from Defective Speech	—	—	—	—	97	37	—	—	97	37
J	Delicate Pupils	1	1	16	11	2.b	—	—	2.d	19	14
	Total ...	10	6	106	79	149	72	6	6	271	163

- (a) Insufficiently deaf to require education at a Special School. Includes 8 boys and 4 girls attending Special Class for Partially Hearing Pupils.
- (b) On waiting list for admission to Special School of appropriate type.
- (c) Includes 2 boys at Hostel for maladjusted Children, and 2 boys on waiting list for admission to Special School of appropriate type.
- (d) 1 girl being taught by the Visiting Teacher and 1 girl on waiting list for admission to Special School of appropriate Type.
- (e) Being taught by the Visiting Teacher.

(a) RESIDENTIAL SPECIAL SCHOOLS

The following table shows the Residential Special Schools, Hostels, and Hospital Special Schools at which Norwich children were in attendance in December, 1967: —

Handicap	No. of Norwich Pupils in attendance at end of year		Name of Special School or Hostel
	Boys	Girls	
Blind ...	—	—	—
Partially Sighted	2	—	E. Anglian School, Gorleston.
Deaf ...	—	2	E. Anglian School, Gorleston.
Partially Hearing	1	—	Tewin Water School, Welwyn, Herts.
	—	1	Ingfield Manor School, Billingshurst Sussex
Educationally Sub-normal ...	1	—	Sidestrand Hall, Norfolk
	1	—	Ashley Downs School Lowestoft, Suffolk.
Epileptic ...	—	2	Lingfield School, Surrey
Maladjusted ...	1	—	Stockwell Hall School, Billericay, Essex
	2	—	Rectory School, Cheveley, Newmarket.
	1	—	Morley Hall Hostel, Norfolk.
	1	—	Colne Cottage Hostel, Norfolk.
	1	—	Coombe Hall School, East Grinstead, Sussex.
Physically Handicapped	—	—	—
Defective Speech	—	—	—
Delicate ...	1	1	Eden Hall, Bacton, Norfolk.

(b) DAY SPECIAL SCHOOLS

Educationally Sub-normal Pupils

These are accommodated at the Parkside Special School for Educationally Sub-normal Pupils.

18 new cases were mentally examined during the year and 4 re-examinations were made. The following tables show the sources from which the new cases were referred, and the recommendations which were made: —

New cases examined mentally	...	...	...	18
Source: Head Teachers	...	...	...	10
School Health Service	...	...	...	7
Hospital Consultant Staff	...	...	...	1
Re-examinations	...	...	...	4

Recommendations, following examination:	Boys	Girls
Special Day School (E.S.N.)	9	5
Special Day School (P.H.)	—	1
Re-examination later (unfit for school meantime)	—	2
Unsuitable for Education at School (For Junior Training Centre)	2	2
Re-examination later (under school age)	1	—

In addition 5 boys and 7 girls already attending Special (E.S.N.) Schools were brought forward for special examinations, and the following recommendations were made: —

	Boys	Girls
Community Care	2	7
Fit for Employment	2	—
Fit to return to Ordinary School	1	—

Physically Handicapped and Delicate Pupils

Pupils who require special educational treatment because they are physically handicapped or delicate are admitted to the Day Special School at Colman Road, known as The Clare School.

	Boys	Girls
Number on Register at beginning of year ...	35	24
Number admitted during the year ...	5	6
Number left during the year ...	9	7

Transferred to Parkside Special School	1	1
Left School	8	6
Number on Register at end of year ...	31	23

Also 3 boys and 4 girls by an arrangement with Norfolk County Education Authority.

Disease or Disability for which admitted.	Boys	Girls
1. Respiratory.		
Asthma ...	4	6
Fibrosis of Lung ...	1	—
Collapse of Lung ...	—	1
2. Orthopædic.		
Congenital Dislocation of Hip-Joint ...	—	1
Arthrogryphosis ...	—	1
Other ...	2	—
3. Nervous System.		
Cerebral Palsy ...	3	3
Spina Bifida ...	2	1
Epilepsy ...	—	2
Muscular Dystrophy ...	3	—
4. General.		
Unsatisfactory General Condition ...	3	4
Congenital Defects ...	2	—
Behaviour Problems ...	3	1
Speech Defect ...	1	—
Partially Hearing ...	1	—
Christmas Disease ...	1	—
Heart Disease ...	1	3
Physical Immaturity ...	2	—
Ectopic Bladder ...	1	—
Delicate (resulting from Galactosaemia)	1	—
	—	—
	31	23
	—	—

(c) HOME TUITION

Handicapped pupils who, in consequence of their disability, have to be taught in their own homes by the Visiting Teachers are examined periodically during the year by a Medical Officer.

In November, 1955, the Education Committee agreed to develop this work in various ways, including the payment of regular visits to the Jenny Lind Hospital for Children, and the Burns Ward of the West Norwich Hospital, by the Teachers

Children absent or likely to be absent from ordinary school, and at home for a month or more with injuries or non-infectious illness are also considered with a view to home tuition.

At the end of the year 5 boys and 4 girls were being taught in their homes by these Teachers. They were suffering from the following defects: —

Boys Gross Maladjustment; Fracture of Femur; Osteomyelitis (2 boys); Osteochondritis.

Girls Asthma; Spina Bifida; Dislocation of left Hip-joint; Fracture of Tibia.

In addition 5 boys and 6 girls were taught in their homes for short periods during the year. They suffered from the following defects: —

Boys Osteomyelitis; Spastic Diplegia (post operative); Fracture of Tibia (2 boys); Gross Maladjustment.

Girls Diabetes Mellitus; Fracture of Femur; Fracture of Tibia; Injury to knee; Gross Maladjustment (2 girls).

(8) DEATHS OF SCHOOL CHILDREN

There were seven recorded deaths of children of school age compared with one in the previous year. The causes of death were: —

Boys

Aged 5 years Acute Lymphoblastic Leukaemia

Aged 7 years Lacerations of Liver, and Rupture of Inferior Vena Cava (Road Accident).

Aged 7 years Progressive Cerebral Degenerative Disease.

Girls

Aged 9 years Bronchitis.

Aged 10 years Sarcoma of Lung.

Aged 13 years Myeloid Leukaemia.

Aged 14 years Multiple Body Injuries (Road Accident)

(9) PROVISION OF MEALS

Mid-day meals are provided by the Local Education Authority to all school children whose parents request these. From time to time the School Medical Officers also put forward cases where they think meals would particularly benefit.

The percentage of children in school having school meals is 59.84 and 74.46% take milk, but these figures mean very little because there is a wide spread between the ages and the two sexes. Unfortunately figures by age and sex are not readily available.

Since September, 1946, school milk has been provided free of charge in all grant-aided Primary and Secondary Schools. The quantity of milk per pupil is maintained as far as possible at one-third of a pint per day, except in the Clare Special School for Physically Handicapped Children where two-thirds of a pint daily is supplied free.

The Welfare Foods Scheme inaugurated on 1st August, 1947, by the Ministry of Food provides that one pint of milk daily at reduced price should be available from registered suppliers all the year round for children between the ages of 5 and 16 who are unable by reason of disability of mind or body to attend school.

A number of invalid children under the Visiting Teacher have availed themselves of this scheme during the year.

(10) DISTRIBUTION OF SUPPLEMENTARY FOODS

During the year school children who on grounds of health were considered to be in need of medical foods, were supplied with such through the Infant Welfare Centres.

(11) HOME VISITING

The follow-up arrangements by the Health Visitors, etc., have not been altered during the year. 472 home visits were paid by the Health Visitors in respect of children who had been advised to have medical treatment.

540 children were involved in 188 families referred during the year to the National Society for the Prevention of Cruelty to Children. Of these 125 children involved in 35 families were referred by the Local Authority.

(12) FOOD HYGIENE

Every care is taken by the School Meals Staff of the Education Department to bring to the notice of their Kitchen Staff the importance of maintaining a very high standard of hygiene. They are also encourage to report any significant illness. ess.

During the year 126 members of the School Meals Staff had investigation of a full history, and a recent X-ray report.

As a precautionary measure, food samples are kept for 48 hours after each meal.

(13) EXAMINATION OF TEACHERS, ETC.

At the request of the Chief Education Officer 93 students, prior to commencing at college, were medically examined during the year, and 200 newly appointed teachers had a recent chest X-ray report, and where necessary, a full medical examination.

(14) EMPLOYMENT OF CHILDREN

Byelaws governing the employment of school children provide that within 14 days from the date when employment begins, a certificate from the Principal School Medical Officer has to be produced to, and endorsed by the employer, certifying that such employment will not be prejudicial to the health or physical development of the child, and will not render him unfit to obtain proper benefit from his education.

During the year 433 examinations were carried out under these byelaws.

VIII.—CIVIL DEFENCE

AMBULANCE AND FIRST AID SECTION

CIVIL DEFENCE

REPORT ON THE AMBULANCE SERVICE RESERVE

Ambulance and First Aid Section of the Civil Defence Corps

Following receipt of Civil Defence Circular No.1/1967 the Norwich Division of the Civil Defence Corps was re-organised on a non-sectional basis in accordance with the plans formulated by the Home Defence Review 1967. This has the effect of virtually disbanding the Ambulance and First Aid Section of the Corps, for the Civil Defence Corps was given an organisational role rather than the provision of operational workers; much more reliance is now placed upon the services of local authorities, Voluntary Aid Societies and the skills of individual member of the community.

Many of the more active members volunteered for alternative duties within the local authority's chain of control whilst others opted to be placed on the Emergency Reserve.

Ambulance Service Reserve

The Civil Defence (Casualty Services) Regulations 1967 which issued in August 1967 require local authorities to raise an Ambulance Service Reserve in order to ensure the expansion of the peace-time ambulance service to meet war-time needs. This Reserve will not be linked directly with the Civil Defence Corps but will form a separate unit of the civil defence services of the local authority.

The Civil Defence Officer has been asked to undertake the recruitment and organisation of the Ambulance Service Reserve as part of the civil defence effort for the City.

Norwich County Borough has been requested to raise one ambulance company, viz:

- 11 Officers
- 120 Members
- 60 Vehicles for use as ambulance in war
- 6 Supporting vehicles.

Recruitment etc., only commenced at the end of November last year and the skeleton of the organisation is only beginning to take shape.

Vehicles

Arrangements have been made for the requisitioning of all the vehicles required should the emergency arise.

One fully equipped vehicle is held for training purposes—

Training

One group of volunteers are at present training each Wednesday evening from 8 p.m. to 9 p.m.

IX.—APPENDIX

ANNUAL REPORT FOR 1967 OF THE DEPARTMENT OF VENERELOGY

NORFOLK & NORWICH HOSPITAL

New cases attending the clinic of the Norfolk and Norwich Hospital numbered 730 compared to 694 in 1966. Syphilis or Gonorrhoea accounted for 170 compared to 156 in 1966 and 134 in 1965. Total attendances were 2,695 (2,708).

Syphilis

Two cases of early infectious syphilis, acquired in London, were treated, both males, one resident in Norwich, the other in Norfolk.

Five cases of late or latent syphilis were treated, one resident in Norwich and four in Norfolk.

One case of congenital syphilis in an adult resident in Norfolk received treatment.

Yaws

One West Indian received treatment for inactive yaws.

Gonorrhoea

New cases increased from 146 to 162. Male cases accounted for 83 (92) and female 79 (54).

Table 1—NEW CASES OF GONORRHOEA

Age			Male	Female	Total 1967	1966	1965
Under 16	...	...	—	2	2	2	1
16 — 17	...	...	4	13	17	11	10
18 — 19	...	...	18	14	32	23	21
20 — 24	...	...	28	25	53	48	39
25 and over	...	...	33	25	58	62	57
Total			83	79	162	146	128

The 15-19 age group in males increased from 17% of the total to 26.5% but the proportion in the same age group in females remained at 37%.

5 male and 4 female patients failed to respond to standard treatment and required re-treatment.

1 male and 2 female patients were re-infected in the year under review.

Table 2—RESIDENCE OF NEW CASES OF GONORRHOEA

		Norwich		Norfolk (Excl. Gt. Yarmouth)		Great Yarmouth and Suffolk		Total
		Male	Female	Male	Female	Male	Female	
Under 16	...	—	—	—	2	—	—	2
16 — 17	...	3	4	1	8	—	1	17
18 — 19	...	10	9	6	5	2	—	32
20 — 24	...	16	16	10	8	2	1	53
25 and over	...	19	18	11	6	3	1	58
Total	...	48	47	28	29	7	3	162

The fact that 65% of the males with gonorrhoea contract their infection in the locality of the clinic indicates that there still remains a large promiscuous pool of untreated gonorrhoea.

Table 3—PLACE OF INFECTION OF MALES WITH GONORRHOEA

		1963	1964	1965	1966	1967
In locality of clinic	...	70	59	48	62	54
Outside clinic area	...	15	11	22	29	28
Unknown	...	11	11	15	1	1
Total	...	96	81	85	92	83

Non-Gonococcal Urethritis

New cases numbered 111 (81). This included 2 cases of Reiter's syndrome.

Other Genital Conditions Requiring Treatment

New cases increased from 190 to 217. This included 46 cases of infestation with pediculosis pubis, 23 male and 23 female cases. Trichomonal infestation was present in 71 cases.

Conditions Requiring No Treatment

Screening tests decreased from 265 to 231, of these 120 were male and 111 female.

The importance of screening on social rather than medical grounds must be stressed and thanks are due to those who have visited contacts and have personally brought them to the clinic for examination.

Of the 29 patients referred from Bramerton Remand Home, 5 were treated for gonorrhoea and 6 required treatment for some other genital condition.

(The figures in parenthesis relate to 1966).

